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UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] B. SEND ACKNOWLEDGMENT TO: (Name and Address) LexisNexis Document Solutions 801 Adlai Stevenson Drive Springfield, IL 62703 8974870-



Eugene "Gene" Moore Fee: \$28.50 Cook County Recorder of Deeds Date: 07/09/2004 01:45 PM Pg: 1 of 3

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

			-,,,,				
1.DEBTOR'S EXACTE	ULL _= _A_NAME - insert only <u>one</u> debtor name (1a or 1b)	- do not abbreviate or combine names					
1a. ORGANIZATION'S N	AME						
OR 16, INDIVIDUAL'S LAST	NAME	FIRST NAME	MIDDLE NAME		SUFFIX		
PARROTT,	JR.	GEORGE					
1c. MAILING ADDRESS	0.4	CITY	STATE	POSTAL CODE	COUNTRY		
5280 PROVID	ENCE DRIVE	MATTESON	IL	60443	USA		
1d. SEE INSTRUCTIONS	MODIFIED THE CITY OF CONTRACT OF THE CONTRACT		1g. ORG	1g. ORGANIZATIONAL ID #, if any			
	ORGANIZATION DEBTOR	IL	<u> </u>		NONE		
2. ADDITIONAL DEBTO	OR'S EXACT FULL LEGAL NAME - insert only ane	lebtor name (2a or 2b) - do not abbreviate or comb	ine names				
2a. ORGANIZATION'S I	NAME						
	•						
OR 2b. INDIVIDUAL'S LAS	NAME	FII ST NA ME	MIDDLE NAME		SUFFIX		
PARROTT		JEAKI ENE					
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY		
EOON DDOWTI	DENCE DRIVE	MATTESON	IL	60443	USA		
2d. SEE INSTRUCTIONS	ADD'L INFO RE 2e. TYPE OF ORGANIZATION	2f. JURISDICTION CF CRG ANIZATION	2g. ORG	ANIZATIONAL ID#, if any			
	ORGANIZATION DEBTOR	IL J	<u>.</u>		NONE		
3 SECURED PARTY	S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/	P)-insert only one secured party nam (3a or ub)					
3a. ORGANIZATION'S							
TO SATUR TO TAKE	MOTAL D.C.D.						
OR BANK FINE	ANCIAL F.S.B.	FIRST NAME	MIDDLE	NAME	SUFFIX		
GB. INDIVIDUAL CENS	1177912		π_{λ}				
3c. MAILING ADDRESS		СІТУ	\$1 VIE	POSTAL CODE	COUNTRY		
		BURR RIDGE	IL	160527	USA		
4 E 110 CO NT	TOONING OF DOAD						

4. This FINANCING STATEMENT covers the following collateral:

All fixtures; whether any of the foregoing is owned now or acquired later; all accessions, additions, replacements, and substitutions relating to any of the foregoing; all records of any kind relating to any of the foregoing; all proceeds relating to any of the foregoing (including insurance, general intangibles and accounts proceeds) for property located at 8352-58 S. Ellis Ave., Chicago, IL 60619. P.I.N. 20-35-303-099-0000.

5. ALTERNATIVE DESIGNATION (III applicable). 6. ALTERNATIVE DESIGNATION (III applicable).	CONSIGNED CONTRACT	BAILEE/BAILOR ST SEARCH REPOR	SELLER/BUYER RT(S) on Debtor(s) Toptional	AG. LIEN	NON-UCC FILING Debtor 1 Debtor 2
8. OPTIONAL FILER REFERENCE DATA COMMERCIAL LO IL-Cook County	п арриоски	3.pgs			Decimant Solutions

FILING OFFICE COPY — UCC FINANCING STATEMENT (FORM UCC1) (REV. 05/22/02)

LexisNexis Document Solutions 801 Adlai Stevenson Drive Springfield, IL 62703-4261

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LOW INSTRUCTIONS (front and back NAME OF FIRST DEBTOR (1a or 1b)		MENT			
9a. ORGANIZATION'S NAME					
9b, INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX			
PARROTT, JR.	GEORGE				
MISCELLANEOUS: IL-COOK	County				
	<u>.</u>				
60					
9					
		ľ			
	<u> </u>	TI	IE ABOVE SPACE IS	FOR FILING OFFI	CE USE ONLY
ADDITIONAL DEBTOR'S EXACT FU	JL', LF GAL NAME - insert only <u>one</u> na	me (11a or 11b) - do not abbreviate or c	ombine names		
11a. ORGANIZATION'S NAME					
445 ANDRUDUANCI ART NAME	<u> </u>	FIRST NAME	MIDDLE N	AMF	SUFFIX
11b. INDIVIDUAL'S LAST NAME		(ICO I MAIL			
: MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
: MAILING ADDRESS					
ADD'L INFO RE	E 11e. TYPE OF ORGANIZATION	11f. JURISDICTIONOF ORGANIZATIO	N 11g. ORGA	ANIZATIONAL ID #, if a	ny
ORGANIZATIO DEBTOR			i I		
ADDITIONAL SECURED PART	Y'S or ASSIGNOR S/P'S	N. ME - insert only one name (12a or	12b)		
12a. ORGANIZATION'S NAME	10 0 1100	O.			
125. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLEN	AME	SUFFIX
					OO INTERV
c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
. This FINANCING STATEMENT covers	timber to be cut or as-extracted	16. Additional collateral description:	0.		
collateral, or is filed as a fixture filing. I. Description of real estate:			1//		
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LOTS 11 TO 24 INC			9,		
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LOW INSTRUCTIONS (front and back)					
NAME OF FIRST DEBTOR (1a or 1b)	ON RELATED FINANCING STA	ATEMEN I			
9a. ORGANIZATION'S NAME					
	FIRST NAME	MIDDLE NAME, SUFFIX			
9b. INDIVIDUAL'S LAST NAME		WINDER MANAGED OF TA			
PARROTT, JR.	GEORGE				
MISCELLANEOUS: IL-COOK	County				
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10					
	A.	THE	ABOVE SPACE	IS FOR FILING OFFI	CE USE ONLY
. ADDITIONAL DEBTOR'S EXACT FU	JL _ LF.GAL NAME - insert only one	name (11a or 11b) - do not abbreviate or com	ibine names		
11a. ORGANIZATION'S NAME	3				
	O_{∞}				
11b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	NAME	SUFFIX
c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
ADD'L INFO RE ORGANIZATIO	11e. TYPE OF ORGANIZATION	111f. JURISDICTIONOF ORGANIZATION	11g. OR	GANIZATIONAL ID #, if	_
DEBTOR		1			NO
. ADDITIONAL SECURED PART	Y'S or ASSIGNOR S/P'	'S N, ME - insert only one name (12a or 12	(b)		
12a, ORGANIZATION'S NAME		0,			
		<u> </u>	MIDDLE	NAME	SUFFIX
12b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDE	NAME	301712
			STATE	POSTAL CODE	COUNTRY
C. MAILING ADDRESS		CITY	John	10011120022	
		d 16. Additional collateral description:	<u> </u>		
3. This FINANCING STATEMENT covers		d 16, Additional collateral description.	9.		
collateral, or is filed as a fixture filing. 4. Description of real estate:					
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EAST OF THE THIRD			9,		
MERIDIAN, IN COOL	K COUNTY,				
ILLINOIS.			,		
				Office .	
				10-	
				()	
15. Name and address of a RECORD OWNE	R of above-described real estate				
15. Name and address of a RECORD OWNE (if Debtor does not have a record interest)	R of above-described real estate				
15. Name and address of a RECORD OWNE (if Debtor does not have a record interest)	R of above-described real estate				
 Name and address of a RECORD OWNE (if Debtor does not have a record interest) 	R of above-described real estate	17. Check only if applicable and check	only one box.	hald in Inch	or∏ Decedent's F
 Name and address of a RECORD OWNE (if Debtor does not have a record interest) 	R of above-described real estate :	Debtor is a Trust or Trustee	acting with respect t	o property held in trust	or Decedent's E
15. Name and address of a RECORD OWNE (if Debtor does not have a record interest)	R of above-described real estate	Debtor is a Trust or Trustee 18. Check only if applicable and check	acting with respect to only one box.	o property held in trust	or Decedent's E
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