MTO2-7574 marine Title

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



Doc#: 0432446008 Eugene "Gene" Moore Fee: \$34.00 Cook County Recorder of Deeds

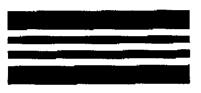
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| DEBTOR'S EXACT FLIJ , LET JAL NAME - Insert only obe debtor name (1 12, ORGANIZATION'S NAME | | E SPACE IS FOR FILING OFFICE | USEONLY |
|---|---|--------------------------------|-------------|
| PARKWAY BANK AND TRUST COMPAI | NY NOT PERSONALLY BU | r as trustee u/ | T/A #136 |
| MAILING ADDRESS | | MIDDLE NAME | SUFFIX |
| | CITY | | |
| 300 NORTH HARLEM AVENUE | IIA DIMOOD | STATE POSTAL CODE | COUNTRY |
| ADD'L INFO RE LIA TYPE OF CHANGE | HARWOOD HEIGHTS | IL 60706 | USA |
| ORGANIZATION TRUST | I THE THE TOTAL OF CREAMING A SION | 19. ORGANIZATIONAL ID #, # a | USA |
| DDITIONAL DESTORIS DATA | IL | 109/05/2003 | |
| DDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert on V | on de tor name (2a or 26) - de net abbreviste er esta | 1457 037 2003 | K N |
| | 4 | OTHE HAMIS | |
| AN INDIVIDUAL'S LAST NAME | | | |
| NAME | FI STNAME | MIDDLE NAME | |
| | | WIDDLE NAME | SUFFIX |
| ALING ADORESS | CITY | | |
| | 4/ | STATE POSTAL CODE | COLINTRY |
| FEINSTRUCTIONS ADD'L INFO RE 20. TYPE OF ORGANIZATION | | | |
| ORGANIZATION DEBTOR | 21. JURISDICTION OF O' GA' IZATION | 2g. ORGANIZATIONAL ID #, if an | |
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| CURED PARTY'S NAME (O'NAME OFTOTAL ASSIGNEE OF ASSIGNOR G. ORGANIZATION'S NAME | S/P)-insert only one secrem producers of | | []NQ |
| | poly riante (32 ar 3h) | | |
| BANKFINANCIAL, F.S.B. | ** |) | |
| b. INDIVIDUAL'S LAST NAME | FIRST NAME | | |
| | | ENAME | SUPFIX |
| | ICITY | - ' ' ' ' | |
| LINGADDRESS | POLIT I | STATE POST CODE | COUNTRY |
| | DITTED DATE | | |
| 1060 NORTH FRONTAGE ROAD FINANCING STATEMENT covers the following collaboral: | BURR RIDGE | IL 60527 | USA |

| S. ALTERNATIVE DESIGNATION (if applicable): LESSEE/LESSOR CONSIGNEE/CONSIGNOR BAILEE/BAILOR SELLER/BUYER AG. LIEN NON-UCC F. ETATE RECORDS. Attach Addendum Bit spoking bell 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) All Debtors Debtor 1 Debtor 1 | FILING abtor 2 |
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| U | CC FINANCING STATEM | ENT ADDENDU | JM | i | | | | |
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| 3. | LLOW INSTRUCTIONS (front and back) NAME OF FIRST DEBTOR (1a or 1b) (| ON RELATED FINANCING | STATEMENT. | ļ | | | | |
| | 90. ORGANIZATIONS NAME | | STATEMENT | 1 | | | • | |
| OF | PARKWAY BANK AND | TRUST COMPAN | TV NOT | ļ | | | | |
| | 9b. INDIVIDUAL'S LAST NAME | FIRST NAME | MIDDLE NAME, SUFFIX | | | | | |
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| 11. | ADDITIONAL DEBTOR'S EXACT FU L | LEGAL NAME - insert only | one name (11e or 11b) - do not abbrev | ale or combine nam | 108 | | 102 002 0 | 3/40.1 |
| ļ | The state of the s | 0 | | | | | | |
| OR | 116, INDIVIDUAL'S LAST NAME | <u> </u> | FIRST NAME | | leaser - | | | |
| | | | | | MIDDLE | NAME | SUF | FIX |
| 11c, | MAILING ADDRESS | 0 | atr | . | STATE | POSTAL CODE | COU | INTRY |
| | ADD'L INFO RE | 11e. TYPE OF ORGANIZATION | 111. JURISDICTION OF ORGAN | ZATION | 144. 25 | | | |
| | ORGANIZATION DEBTOR | • | I MANUAL MONTOR CHARM | ZATION | JIIG OK | CANIZATIONAL ID #, IT | Bny | _ |
| 12. | ADDITIONAL SECURED PARTY'S | ≥ Massignor s/ | P'S NAME - insert only one name (| (2a or 12b) | <u> </u> | " | · · | NON |
| ł | 128, UNGANIZATION'S NAME | | 0, | | | | | |
| OR . | 125. INDIVIDUAL'S LAST NAME | | FIRST NAME | · | | | | |
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UCC FINANCING STATEMENT

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

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| 1. DEBTOR'S EXACTE | LF_LEF SAL NAME-insert only mandebtor name (12 or 1) | b) - do not abbreviate or combine names | | |
|-------------------------|--|--|-----------------------------|------------|
| 1a. ORGANIZATION'S I | NAME | | | |
| PARKWAY B | ANK AND TRUST COMPANY | NOT PERSONALLY BUT | AS TRUSTEE U/ | r/A #13623 |
| OR THE INDIVIDUAL SLAST | NAME | FIRST NAME | MIDDLE NAME | SUFFIX |
| \ | | | | <u> </u> |
| 1c. MAILING ADDRESS | U x | CITY | STATE POSTAL CODE | COUNTRY |
| 4800 NORTH | HARLEM AVENUE | HARWOOD HEIGHTS | IL 60706 | USA |
| 1d. SEE INSTRUCTIONS | ADO'L INFO RE 16, TIPE OF RIGHT ZATION | 11. JURISDICTION OF ORGANIZATION | 1g. ORGANIZATIONAL ID #, # | апу |
| | ORGANIZATION TRUST | IL | 09/05/2003 | NONE |
| 2, ADDITIONAL DEBTO | OR'S EXACT FULL LEGAL NAME - Insent niyo a | entror name (2s or 2b) - do not abbreviate or comb | lne namés | |
| 28. ORGANIZATION'S | WME | | | |
| | | | | |
| OR 25. INDIVIDUAL'S LAS | NAME | -IRST I AME | MIDDLE NAME | SUFFIX |
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| 20, MAILING ADDRESS | | CITY | STATE POSTAL CODE | COUNTRY |
| 2d. SEEINSTRUCTIONS | ADD'L INFO RE 20, TYPE OF ORGANIZATION | 21 JURISDICTION AF AGANIZATION | 2g. ORGANIZATIONAL ID #, If | any |
| | ORGANIZATION DESTOR | | | NONE |
| 3. SECURED PARTY | S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S | (3a or: b) | | |
| 34, ORGANIZATION'S | NAME | | | |
| BANKFINAN | CIAL, F.S.B. | |) | |
| OR 35. INDIVIDUAL'S LAS | NAME | FIRST NAME | MIDDLE NAME | SUFFIX |
| 1 | | | 17/ | |
| 3c. MAILING ADDRESS | | απν | ST. TL POSTAL CODE | COUNTRY |
| 15W060 NORT | H FRONTAGE ROAD | BURR RIDGE | 11 50527 | USA |
| | ENT covers the following cullateral: | | | |

SEE EXHIBITS A AND B ATTACHED HERETO AND MADE A PART HEREOF

| 5. ALTERNATIVE DESIGNATION [if applicable]: LESSEE/LESSOR CONSIGNEE/CONSIGNOR BAILEE/BAILO | | AG. LIEN NON-UCC FILING |
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| 8, OPTIONAL FILER REFERENCE DATA HSD/08792.15300 | | |
| IL-Cook County | | |

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| 16. Additional collateral descriptor | | |
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| 12 Phone only if monitochie and chock | | |
| 18. Check only if applicable and check | | |
| Debtor is a TRANSMITTING UTILIT | | в |
| | FIRST NAME CITY 11f. JURISDICTION OF ORGANIZATION AAME - Insert only one name (12a or 12b) FIRST NAME CITY 16. Additional colleteral description: | THE ABOVE SPACE IS FOR FILING OFF Same (11s or 11b) - 30 not abbreviate or combine names FIRST NAME FIRST NAME MIDDLE NAME STATE POSTAL CODE 11st. JURISDICTION OF ORGANIZATION 11g. ORGANIZATIONAL IO #, if AAME neert only one name (12s or 12b) FIRST NAME OTTY STATE POSTAL CODE 15. Additional collateral descriptions STATE POSTAL CODE 17. Check sook if applicable and check soly one box. Deblor is a Trust or Trustee sucting with respect to properly held in trust |

2012/019

UNOFFICIAL

Parkway Bank and Trust Company, not personally, but as Trustee u/t/a No. 13623

EXHIBIT "A"

All improvements of every nature whatsoever now or hereafter situated on the land described on Exhibit "B" (the "Premises"), and all fixtures and personal property of every nature whatsoever now or hereafter owned by Debtor and on, used or intended to be used in connection with the Premises or the improvements, or in connection with any construction thereon, including all extensions, additions, improvements, betterments, renewals, substitutions and replacements to any of the foregoing and all of the right, title and interest of Debtor in and to any such personal property or fixtures together with the benefit of any deposits or payments now or hereafter made on such personal property or fixtures by Debtor or on its behalf. All fixtures and article; or personal property now or hereafter owned by Debtor and forming a part of or used in connection with the Framises or the improvements, including, but without limitation, all furniture, furnishings and equipment furnished by Mortgagor to tenants of the Real Estate or Improvements; all building materials and equipment located upon the Real Estate and intended to be incorporated in the Improvements now or hereafter to be constructed thereon, whether or not yet incorporated in such Improvements; all machines, machinery, fixtures, apparatus, equipment or articles used in supplying heating, gas, electricity, air-conditioning, water, light, power, sprinkler protection, waste removal, refrigeration and ventilation, and all fire sprinklers, alarm systems, electronic monitoring equipment and devices; all window or structural cleaning rigs, maintenance equipment relating to exclusion of vermin or insects and removal of dust, refuse or garbage; all lobby and other in loor and outdoor furniture, including tables, chairs, planters, desks, sofas, shelves, lockers and cabinets, wall beds, wall safes, and other furnishings; all rugs, carpets and other floor coverings, drapery rods and brackets, twings, window shades, venetian blinds and curtains; all lamps, chandeliers and other lighting fixtures; an recreational equipment and materials; all office furniture, equipment and supplies; all kitchen equipment, including refrigerators, ovens, dishwashers, range hoods and exhaust systems and disposal units; all laundly equipment, including washers and dryers; all tractors, mowers, sweepers, snow removal equipment and other equipment used in maintenance of exterior portions of the Real Estate; all maintenance supplies and inventeries; and all renewals or replacements thereof or articles in substitution therefor, whether or not the same 7.e or shall be attached to the Premises in any manner.

All "collateral" as defined in the security agreement contained in the Mortgage and Security Agreement, Assignment of Rents and of Lessor's Interest in Leases and any other loan decuments by and between Debtor and the Secured Party described herein.

All revenues, receivables, rents, deposits, profits and issues derived by Debtor from the Premises.

All judgments, awards of damages and settlements hereafter made resulting from condemnation proceeds or the taking of the Premises or any portion thereof under the power of eminent domain, any proceeds of any policies of insurance, maintained with respect to the Premises or proceeds of any sale, option or contract to sell the Premises or any portion thereof.

All monies on deposit for the payment of real estate taxes or special assessments against the Premises, or for the payment of premiums on policies of fire or other hazard insurance covering the collateral described herein or the Premises.

All right, title and interest of Debtor in and to any bank accounts maintained by Debtor with Secured Party in connection with the operation, development or financing of the Premises.

Any and all additions to all of the foregoing and any and all proceeds, renewals, replacements and substitutions of all of the foregoing.

EXHIBIT "B"

LEGAL DESCRIPTION

LOT 2 (EXCEPT THE WEST 60 FEET THEREOF) IN HOMEIER'S SUBDIVISION, BEING A PART OF THE WEST HALF OF THE NORTHWEST QUARTER OF SECTION 33, TOWNSHIP 42 NORTH, RANGE 10 EAST OF THE THIRD PRINCIPAL MERIDIAN, ACCORDING TO THE PLAT THEREOF RECORDED SEPTEMBER 8, 1967 AS DOCUMENT NO. 20254452, EXCEPTING THEREFROM THAT PART THEREOF TAKEN BY THE DEPARTMENT OF TRANSPORTATION OF THE STATE OF ILLINOIS FOR AND ON BEHALF OF THE PEOPLE OF THE STATE OF ILLINOIS, DESCRIBED AS FOLLOWS: COMMENCING AT THE NORTHWEST CORNER OF THE ABOVE DESCRIBED TRACT AS MONUMENTED AND OCCUPIED; THENCE ALONG AN ASSUMED BEARING OF SOUTH 00 DEGREES 11 MINUTES 07 SECONDS WEST, A DISTANCE OF 335.92 I CET ALONG THE WEST LINE OF THE ABOVE DESCRIBED TRACT FOR A POINT OF BEGINNING; THE OF SOUTH 50 DEGREES 38 MINUTES 25 SECONDS EAST, 259.15 FEET TO A POINT ON THE EAST LINE (IF / FORESAID LOT 2; THENCE SOUTH 00 DEGREES 11 MINUTES 07 SECONDS WEST. 36.15 FEET ALCING SAID EAST LINE TO ITS INTERSECTION WITH THE EXISTING NORTHERLY RIGHT OF WAY LINE OF ALGONQUIN ROAD, SAID POINT ALSO BEING THE SOUTHEAST CORNER OF SAID LOT 2; THENCE NO 27:1 51 DEGREES 02 MINUTES 27 SECONDS WEST, 257.69 FEET ALONG SAID EXISTING NORTHERLY HIGHT OF WAY LINE AND ALONG THE SOUTHERLY LINE OF SAID LOT 2 TO ITS INTERSECTION WITH SAID WEST, LINE OF THE ABOVE DESCRIBED TRACT (FOUND 1/2 INCH IRON PIPE 1.05 FEET SOUTH 0.00 FEET EAST); THENCE NORTH 00 DEGREES 11 MINUTES 07 SECOND EAST, 38.48 FEET ALCAC SAID WEST LINE TO THE POINT OF BEGINNING, IN COOK COUNTY, ILLINOIS.

STA COUNTY CLERT'S OFFICE COMMONLY KNOWN AS: 15 (0 WEST ALGONQUIN ROAD, PALATINE, IL 50067

PIN#: 02-33-100-015-0000