

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional] Phone: (800) 331-3282 Fax: (818) 6	662-4141
B. SEND ACKNOWLEDGEMENT TO: (Name and Address)	510656 IPRIMEACCEPT
UCC Direct Services P.O. Box 29071	6502816
Glendale, CA 91209-9071	ILIL FIXTURE I

Tile with: Cook+, IL

Doc#: 0501945014 Eugene "Gene" Moore Fee: \$28.50 Cook County Recorder of Deeds

Date: 01/19/2005 08:43 AM Pg: 1 of 3

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

.1. E	DEBTOR'S EXACT FU	LL LEGAL NAME	insert only one debtor name (1)	a or 1b) - do not abbreviate or comb	ine namee		·
OR	1a. ORGANIZATION'S N	IAME) ()	2 of 167 do not abbreviate of confi	one names		
٠,٠	1b. INDIVIDUAL'S LAST	NAME	7/X.	FIRST NAME	MIDDLE	NAME	SUFFIX
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1709 GREEN MEADOWS			STREAMWOOD	STATE	POSTAL CODE 60107	COUNTRY	
1d.	SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZA I ION	1f. JURISDICTION OF ORGANIZATIO	N 1g. OR	SANIZATIONAL ID #, if an	y NONE
2. A	DDITIONAL DEBTOR	'S EXACT FULL L	EGAL NAME - insert only one re	ebt r name (2a or 2b) - do not abbr	eviate or combine r	names	
OR	2a. ORGANIZATION'S N	IAME		40	** BV:		
2b. INDIVIDUAL'S LAST NAME		FIRST I AME	MIDDLE	MIDDLE NAME SU			
2c. l	MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY
	SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGA		GANIZATIONAL ID #, if an	y None
3. S	ECURED PARTY'S N.	AME (or NAME of	TOTAL ASSIGNEE of ASSIGNO	OR S/P) - insert only one secured pa	ort name (3a or 3b)	
OR	PRIME ACC	AMF			10/4		,
JIX	3b. INDIVIDUAL'S LAST	NAME		FIRST NAME	MIDE CE	NAME	SUFFIX
	00 W JACKS	ON BLVD #	720	CHICAGO	STATE	POST IL CODE	COUNTRY

4.	This	FINANCING	STATEMENT	covers the	following	collateral:
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WHOLE HOUSE WATER TREATMENT SYSTEM



5. ALTERNATIVE DESIGNATION [if applicable] LESSEE/LESSOR	CONSIGNEE/CONSIGNOR BAILEE/BAILOR SELLER/BUYER AG. LIEN NON-UCC FILING
6. This FINANCING STATEMENT is to be filed for record (or record	ed) in the REAL 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s)
ESTATE RECORDS. Attach Addendum	All Debtor 2 Debtor 1 Debtor 2
8. OPTIONAL FILER REFERENCE DATA	
6502816	610020124

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NAME	/ INSTRUCTIONS (front and back) (
9a. OR	OF FIRST DEBTOR (1a or 1b) ON RGANIZATION'S NAME	RELATED FINANCING STATE	MENT			
	DIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX			
L	NDIOLA	CELESTINO				
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e with:	: Cook+, iL					
ADDI	TIONAL DEBTOR'S EXACT FULL L	TGA NAME inport only one o	omo (14a au 44b) da - 1		S FOR FILING OFFICE USE	ONLY
11a. (ORGANIZATION'S NAME	LEGY LAW AVIE - Insert only one h	ame (11a or 11b) - do not a	addreviate or combine n	ames	77.45
11b. l	INDIVIDUAL'S LAST NAME	0.5	FIRST NAME	MI	DDLE NAME	SUFFIX
					TOTAL TANKE	SOFFIX
c. MAILIN	NG ADDRESS		CITY	ST	ATE POSTAL CODE	COUNTRY
d. <u>SEE IN</u>	NSTRUCTION ADD'L INFO RE ORGANIZATION DEBTOR	11e. TYPE OF ORGANIZATION	11 JURISDICTION OF ORG	ANIZATION 11g	 . ORGANIZATIONAL ID#, if	any No
	ADDITIONAL SECURED PARTY'S	or ASSIGNOR S/P's NA	AME - incert only one name	(12a or 12b)		
12a. (ORGANIZATION'S NAME		0,	(125 51 125)		
12b. II	INDIVIDUAL'S LAST NAME		FIRST NAME	MI	DDLE NAME	SUFFIX
	NG ADDRESS					
J. IVIAILIP	NG ADDRESS		CITY	(),	ATE POSTAL CODE	COUNTRY
Thia EIN			16. Additional collateral description		** **	
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Description of the control of the co	ral or is filed as a	DN: GLENBROOK UNIT S13 T41NR09E 3P.	17. Check only if applicable and Debtor is a Trust or The same of	rustee acting with respect to	property held in trust or	Decedent's Esta

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LEGAL DESCRIPTION:

LOT 496 IN GLENBROOK UNIT NUMBER 6, BEING A SUBDIVISION OF PART OF THE SOUTH 1/2 OF SECTION 13, TOWNSHIP 41 NORTH, RANGE 9, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PERMANENT INDEX NO.: 06-13-405-017



