NOFFICIAL COPY

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] B. SEND ACKNOWLEDGMENT TO: (Name and Address) FIRST BANK OF HIGHLAND PARK 1835 FIRST ST HIGHLAND PARK, IL 60035

Doc#: 0502850094

Eugene "Gene" Moore Fee: \$26.00 Cook County Recorder of Deeds Date: 01/28/2005 09:20 AM Pg: 1 of 2

					THE ABOVE SPA	CE IS FC	R FILING OFFICE US	E ONLY	
1. [DEBTOR'S EXACT FU	ILL LEGAL MAMI	- insert only one debtor name (1a o	r 1b) - do not abbreviat	e or combine names				
	1a. ORGANIZATION'S NA								
	TRA VEL - 519 PARK LLC								
OR	1b. INDIVIDUAL'S LAST NAME			FIRST NAME		MIDDLE NAME		SUFFIX	
1c.	MAILING ADDRESS		0,0	CITY		STATE	POSTAL CODE	COUNTRY	
C	O MARC REA	ALTY55 E	AST JACKSON	CHICAGO	1	IL	60604	USA	
1d.	SEE INSTRUCTIONS		1e. TYPE OF ORGANI ATION	1f. JURISDICTION C	F ORGANIZATION	1g. ÖRG	ANIZATIONAL ID #, if any	<u></u>	
		ORGANIZATION DEBTOR	LIMITED	₁ IL	:	0104	9844	Non	
2. A	ADDITIONAL DEBTOR	S EXACT FULL	LEGAL NAME - insert only one de	eb' or name (2a or 2b) -	do not abbreviate or combine na	ames			
	2a. ORGANIZATION'S NA	ME		7					
۵.									
OR	2b. INDIVIDUAL'S LAST NAME			FIRST NAME		MIDDLE NAME		SUFFIX	
2c. (MAILING ADDRESS			CITY	D *	STATE	POSTAL CODE	COUNTRY	
2d.	SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION	2e. TYPE OF ORGANIZATION	2f. JURISDICTION C	F OPG MIZATION	2g. ORG	ANIZATIONAL ID#, if any		
		DEBTOR		1 .				NON	
3. Ş	ECURED PARTY'S	NAME (or NAME of	f TOTAL ASSIGNEE of ASSIGNOR	S/P) - insert only one so	ecured party name (לביזי)				
-	3a. ORGANIZATION'S NA								
<u> </u>	FIRST BANK OF HIGHLAND PARK								
OR	3b. INDIVIDUAL'S LAST N	IAME .		FIRST NAME		MIO IL TI	NAME	SUFFIX	
				<u> </u>					
3c. MAILING ADDRESS				CITY		STATE	POS', A', CODE	COUNTRY	
1835 FIRST ST				HIGHLAN	D PARK	IL	60035	USA	

4. This FINANCING STATEMENT covers the following collateral:

All Fixtures which are located at the real property commonly known as 519 PARK DRIVE, KENILWORTH, ILLINOIS, COOK COUNTY, including but not limited to hot water heaters, cooling and heating equipment, sinks, plumbing 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) and all accessions thereto, and replacements thereof including all proceeds therefrom, all of which are attached and made apart of the realty described hereon.

PIN 05-28-217-030-0000

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 recorded)	in the REAL 7 Check to REQ [if applicable] [ADDITIONAL	IUEST SEARCH REPOR FEE] [T(S) on Debtor(s)	All Debtors	Debtor 1 Debtor 2
ö	OPTIONAL FILED DEFERENCE DATA		-				

0502850094 Page: 2 of 2

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UCC FINANCING STATEMENT ADDENDUM					
FOLLOW INSTRUCTIONS (front and back) CAREFULLY 9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STAT	TRACAIT				
98. ORGANIZATION'S NAME	EIVIEIN I				
TRA VEL - 519 PARK LLC		Ì			
OR 9b. INDIVIDUAL'S LAST NAME FIRST NAME	MIDDLE NAME, S	SUFFIX			
10. MISCELLANEOUS:	<u> </u>				
O _A		THE ABOVE	SPACE	S FOR FILING OFF	CE USE ONLY
11. ADDITIONAL DEBTOR'S EXACT FULL LE AT NAME - insert only one n	ame (11a or 11b) - do no	ot abbreviate or combine nam	es		
11a. ORGANIZATION'S NAME					
OR OR					
11b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE	NAME	SUFFIX
11c. MAILING ADDRESS .	CITY		STATE	POSTAL CODE	COUNTRY
11d. SEE INSTRUCTIONS ADD'L INFO RE 11e. TYPE OF ORGANIZATION ORGANIZATION	1 f. JURISDICTION OF	FORGANIZATION	11g. OR	GANIZATIONAL ID#, if	
DEBTOR			<u> </u>		NONE
12. ADDITIONAL SECURED PARTY'S or ASSIGNOR S/P'S 12a. ORGANIZATION'S NAME	NAME - ir sert nly on	name (12a or 12b)			
OR	9/	Ż _×			
12b. INDIVIDUAL'S LAST NAME	FIRST NAME	9	MIDDLE	NAME	SUFFIX
12c. MAILING ADDRESS	CITY	-	STATE	POSTAL CODE	COUNTRY
126. HALING ABSTREES					
13. This FINANCING STATEMENT covers timber to be cut or as-extracted	16. Additional collatera	al description:		<u> </u>	
collateral, or is filed as a fixture filing.		1	_/		
14. Description of real estate:		*	S		
LOT 28 (EXCEPT THE EAST 1 INCH THEREOF) IN BLOCK 5 IN WEST KENILWORTH, A SUBDIVISION OF THAT PART OF THE SOUTHWEST 1/4 OF THE NORTHEAST 1/4 OF SECTION 28, TOWNSHIP 42 NORTH, RANGE 13, EST OF THE THIRD PRINCIPAL MERIDIAN, LYING WEST OF RIGHT OF WAY OF CHICAGO AND NORTH WESTERN RAILROAD COMPANY AND SOUTH OF THE CENTER LINE OF PUBLIC DRAIN KNOWN AS SKOKIE DITCH, IN COOK COUNTY, ILLINOIS.					
Name and address of a RECORD OWNER of above-described real estate (if Debtor does not have a record interest):					
		cable and check <u>only</u> one box or Trustee acting with res		operty held in trust 0	Decedent's Estate
		cable and check only one box			1
	Debtor is a TRANS				
		with a Manufactured-Home 1	ransaction	n - effective 30 years	
	Filed in connection	with a Public-Finance Trans	action - eff	ective 30 years	