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Doc#: 0506748222
Eugene "Gene" Moore Fee: \$26.00
Cook County Recorder of Deeds
Date: 03/08/2005 01:25 PM Pg: 1 of 2

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

NR 2937

A. NAME & PHONE OF CONTACT AT FILER [optional] DEBORAH J. KRAMER (312) 782-8888
B. SEND ACKNOWLEDGMENT TO: (Name and Address) DEBORAH J. KRAMER HEINRICH & KRAMER, P.C. 205 W. RANDOLPH, #1750 CHICAGO, IL 60606

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME SPRING 2 ASSOCIATES						
OR	1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
1c. MAILING ADDRESS 202 BLACK MATT ROAD			CITY DOUGLASSVILLE	STATE PA	POSTAL CODE 19518	COUNTRY USA
1d. SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION LIMITED PARTNERSHIP	1f. JURISDICTION OF ORGANIZATION PENNSYLVANIA	1g. ORGANIZATIONAL ID #, if any 1018924 <input type="checkbox"/> NONE		

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME						
OR	2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
2c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY
2d. SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE		

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME AMCORE BANK, N.A.						
OR	3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
3c. MAILING ADDRESS 2601 OAK STREET			CITY ST. CHARLES	STATE IL	POSTAL CODE 60175	COUNTRY USA

4. This FINANCING STATEMENT covers the following collateral:

FIXTURES: ALL GOODS NOW OR IN THE FUTURE AFFIXED OR ATTACHED TO REAL ESTATE LEGALLY DESCRIBED IN EXHIBIT "A" ATTACHED HERETO AND MADE A PART HEREOF

5. ALTERNATIVE DESIGNATION [if applicable]:	<input type="checkbox"/> LESSEE/LESSOR	<input type="checkbox"/> CONSIGNEE/CONSIGNOR	<input type="checkbox"/> BAILEE/BAILOR	<input type="checkbox"/> SELLER/BUYER	<input type="checkbox"/> AG. LIEN	<input type="checkbox"/> NON-UCC FILING
6. <input checked="" type="checkbox"/> This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. Attach Addendum [if applicable]	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [OPTIONAL FEE]		<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2	

8. OPTIONAL FILER REFERENCE DATA

49870004987000

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EXHIBIT A TO UCC FINANCING STATEMENT

DEBTOR: SPRING 2 ASSOCIATES
DEBTOR MAILING ADDRESS: 202 BLACK MATT ROAD, DOUGLASSVILLE, PA 19518
ORGANIZATIONAL # : 1018924

LEGAL DESCRIPTION

THAT PART OF THE NORTHWEST 1/4 OF THE SOUTHWEST 1/4 OF SECTION 27, TOWNSHIP 40 NORTH, RANGE 12 EAST OF THE THIRD PRINCIPAL MERIDIAN, LYING BETWEEN THE EAST LINE OF THE WEST 414.60 FEET AND THE WEST LINE OF THE EAST 680 FEET OF SAID 1/4 1/4 SECTION; SOUTH OF A LINE 54 FEET SOUTH WESTERLY OF THE CENTER LINE OF GRAND AVENUE AND NORTH OF A LINE DRAWN AT RIGHT ANGLES TO THE WEST LINE THE EAST 680 FEET OF SAID NORTHWEST 1/4 OF SOUTHWEST 1/4 OF SECTION 27 WHICH IS 872.43 FEET NORTH OF THE SOUTH LINE OF SAID 1/4 1/4 SECTION, EXCEPTING FROM ABOVE THE DESCRIBED TRACT OF LANDS WEST 18 FEET LYING BETWEEN 2 LINES DRAWN AT RIGHT ANGLES TO THE WEST LINE OF SAID TRACT THROUGH POINTS 283 FEET AND 313 FEET RESPECTIVELY, NORTH OF THE SOUTH WEST CORNER THEREOF, IN COOK COUNTY, ILLINOIS.

P.I.N.: 12-27-300-019

PROPERTY ADDRESS: 9501 WEST GRAND AVENUE, FRANKLIN PARK, IL 60131