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Doc#: 0509822142  
Eugene "Gene" Moore Fee: \$28.50  
Cook County Recorder of Deeds  
Date: 04/08/2005 01:52 PM Pg: 1 of 3

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER (optional)  
Phone: (800) 331-3282 Fax: (818) 662-4141

B. SEND ACKNOWLEDGEMENT TO: (Name and Address) 506111 IFIRSTMIDWEST

UCC Direct Services 6616306  
P.O. Box 29071  
Glendale, CA 91209-9071 ILIL  
FIXTURE

File with: Cook+, IL

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  
OAK-ELM DONUTS, INC.

OR  
1b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

1c. MAILING ADDRESS  
782 WEST OAKTON CITY DES PLAINES STATE IL POSTAL CODE 60018 COUNTRY

1d. SEE INSTRUCTIONS ADD'L INFO RE ORGANIZATION DEBTOR 1e. TYPE OF ORGANIZATION CORPORATION 1f. JURISDICTION OF ORGANIZATION IL 1g. ORGANIZATIONAL ID #, if any IL 63653918  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  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  
FIRST MIDWEST BANK

OR  
3b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

3c. MAILING ADDRESS  
300 PARK BLVD SUITE 400 CITY ITASCA STATE IL POSTAL CODE 60143 COUNTRY

4. This FINANCING STATEMENT covers the following collateral: *Am# 09-19-416-013-000*

All Fixtures; whether any of the foregoing is owned now or aquired 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) LOT 73 IN HERZOG'S 4TH ADD TO DES PLAINES, A SUBDIVISION OF PART OF THE EAST 1/2 OF THE SOUTHEAST 1/4 OF SECTION 19, TOWNSHIP 41 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

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 ESTATE RECORDS. Attach Addendum (if applicable) 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s)  All Debtors  Debtor 1  Debtor 2 (optional) (ADDITIONAL FEE)

8. OPTIONAL FILER REFERENCE DATA

6616306

*My 3P 11/17*

**UNOFFICIAL COPY****FINANCING STATEMENT ADDENDUM**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

**9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT**

|  |                            |            |                     |
|--|----------------------------|------------|---------------------|
| 9a. ORGANIZATION'S NAME<br><b>OAK-ELM DONUTS, INC.</b> |                            |            |                     |
| OR   | 9b. INDIVIDUAL'S LAST NAME | FIRST NAME | MIDDLE NAME, SUFFIX |

**10. MISCELLANEOUS****6616306-40-1****506111 IFIRSTMIDWEST**

File with: Cook+, IL

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**11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (11a or 11b) - do not abbreviate or combine names**

|                          |                                   |                           |                              |                                  |                               |
|--------------------------|-----------------------------------|---------------------------|------------------------------|----------------------------------|-------------------------------|
| 11a. ORGANIZATION'S NAME |                                   |                           |                              |                                  |                               |
| OR                       | 11b. INDIVIDUAL'S LAST NAME       | FIRST NAME                | MIDDLE NAME                  | SUFFIX                           |                               |
| 11c. MAILING ADDRESS     |                                   | CITY                      | STATE                        | POSTAL CODE                      | COUNTRY                       |
| 11d. SEE INSTRUCTION     | ADD'L INFO RE ORGANIZATION DEBTOR | 11e. TYPE OF ORGANIZATION | JURISDICTION OF ORGANIZATION | 11g. ORGANIZATIONAL ID #, if any | <input type="checkbox"/> NONE |

**12.  ADDITIONAL SECURED PARTY'S or  ASSIGNOR S/P's NAME - insert only one name (12a or 12b)**

|                          |                             |            |             |             |         |
|--------------------------|-----------------------------|------------|-------------|-------------|---------|
| 12a. ORGANIZATION'S NAME |                             |            |             |             |         |
| OR                       | 12b. INDIVIDUAL'S LAST NAME | FIRST NAME | MIDDLE NAME | SUFFIX      |         |
| 12c. MAILING ADDRESS     |                             | CITY       | STATE       | POSTAL CODE | COUNTRY |

13. This FINANCING STATEMENT covers  timber to be cut or  as-extracted collateral or is filed as a  fixture filing.

**14. Description of real estate:**

Description: LOT 73 IN HERZOG'S. Parcel ID:  
09-19-416-013-000

15. Name and address of a RECORD OWNER of above-described real estate  
(if Debtor does not have a record interest):

**16. Additional collateral description:**

17. Check only if applicable and check only one box.

Debtor is a  Trust or  Trustee acting with respect to property held in trust or  Decedent's Estate

18. Check only if applicable and check only one box.

- Debtor is a TRANSMITTING UTILITY  
 Filed in connection with a Manufactured-Home Transaction -- effective 30 years  
 Filed in connection with a Public-Finance Transaction -- effective 30 years

**UNOFFICIAL COPY****UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

|   |                      |
|---|----------------------|
| A. NAME & PHONE OF CONTACT AT FILER [optional]<br>Phone: (800) 331-3282 Fax: (818) 662-4141 |                      |
| B. SEND ACKNOWLEDGEMENT TO: (Name and Address)  | 506111 IFIRSTMIDWEST |
| UCC Direct Services   | 6616306              |
| P.O. Box 29071  | ILIL                 |
| Glendale, CA 91209-9071   | FIXTURE              |
| File with: Cook+, IL  |                      |

|  |                                   |   |  |  |                      |         |
|--|-----------------------------------|---|--|--|----------------------|---------|
| 1. DEBTOR'S EXACT FULL LEGAL NAME - insert only <u>one</u> debtor name (1a or 1b) - do not abbreviate or combine names |                                   |   |  |  |                      |         |
| 1a. ORGANIZATION'S NAME<br>OAK-ELM DONUTS, INC.  |                                   |   |  |  |                      |         |
| OR   | 1b. INDIVIDUAL'S LAST NAME        |   | FIRST NAME                             | MIDDLE NAME  | SUFFIX               |         |
| 1c. MAILING ADDRESS<br>782 WEST OAKTON   |                                   |   | CITY<br>DES PLAINES                    | STATE<br>IL  | POSTAL CODE<br>60018 | COUNTRY |
| 1d. SEE INSTRUCTIONS   | ADD'L INFO RE ORGANIZATION DEBTOR | 1e. TYPE OF ORGANIZATION<br>CORPORATION | 1f. JURISDICTION OF ORGANIZATION<br>IL | 1g. ORGANIZATIONAL ID #, if any<br>IL 63653918 <input type="checkbox"/> NONE |                      |         |

|   |                                   |                          |                                  |   |             |         |
|---|-----------------------------------|--------------------------|----------------------------------|---|-------------|---------|
| 2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only <u>one</u> 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 <u>one</u> secured party name (3a or 3b) |                            |  |                |             |                      |         |
| 3a. ORGANIZATION'S NAME<br>FIRST MIDWEST BANK  |                            |  |                |             |                      |         |
| OR   | 3b. INDIVIDUAL'S LAST NAME |  | FIRST NAME     | MIDDLE NAME | SUFFIX               |         |
| 3c. MAILING ADDRESS<br>300 PARK BLVD SUITE 400   |                            |  | CITY<br>ITASCA | STATE<br>IL | POSTAL CODE<br>60143 | COUNTRY |

4. This FINANCING STATEMENT covers the following collateral: *UCC # 09-19-416-013-000*

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) LOT 73 IN HERZOG'S 4TH ADD TO DES PLAINES, A SUBDIVISION OF PART OF THE EAST 1/2 OF THE SOUTHEAST 1/4 OF SECTION 19, TOWNSHIP 41 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

|  |  |  |  |                                       |                                   |   |
|--|--|--|--|---------------------------------------|-----------------------------------|---|
| 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 (or recorded) in the REAL ESTATE RECORDS. Attach Addendum [if applicable] | 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [optional] |  | <input type="checkbox"/> All Debtors   | <input type="checkbox"/> Debtor 1     | <input type="checkbox"/> Debtor 2 |   |
| 8. OPTIONAL FILER REFERENCE DATA<br>6616306  |  |  |  |                                       |                                   |   |