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Doc#: 0520241143

Eugene "Gene" Moore Fee: \$26.00 Cook County Recorder of Deeds

Date: 07/21/2005 12:33 PM Pg: 1 of 2

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY	
A. NAME & PHONE OF CONTACT AT FILER [optional]	
B. SEND ACKNOWLEDGEMENT TO: (Name and Address)	
LASALLE BANK NATIONAL ASSOCIATION 135 SOUTH LASALLE STREET CHICAGO, IL 60603	
	THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY
1. DEBTOR'S EXACT FULL LEGAL : PINE - insert only one debtor name (1a or 1b) - do not a	bbreviate or combine names
1a. ORGANIZATION'S NAME	

1. 1	DEBTOR'S EXACT F	ULL LEGAL N <i>P</i> ∭	🍒 - insert only <u>one</u> debtor name (1a	or 1b) - do not abbreviate or combine names			
	1a. ORGANIZATION'S N	AME /	0,				
OR	1b. INDIVIDUAL'S LAST ORR	NAME	4	FIRST NAME LOIS	MIDDLE	NAME	SUFFIX
1c. MAILING ADDRESS 3416 34TH STREET NW			WASHINGTON	STATE DC	POSTAL CODE 2008	COUNTRY	
1d.	TAX ID #: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZ \TION	1f. JURISDICTION OF ORGANIZATION	1g. ORG	ANIZATIONAL ID #, if an	y X NON
2. /	ADDITIONAL DEBTO	R'S EXACT FULI	L LEGAL NAME - insert only one of	ocidor 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.	TAX ID #: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORG	ANIZATIONAL ID#, if an	y NON
3. 3	SECURED PARTY'S	NAME (or NAME	of TOTAL ASSIGNEE of ASSIGNOR	R S/P) - insert only one secured party name (3	(£ 01 ° J)		
	3a. ORGANIZATION'S N	AME	IONAL ASSOCIAT		77		
OR	3b. INDIVIDUAL'S LAST	NAME	, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	FIRST NAME	WIDELE	NAME	SUFFIX
3c.	MAILING ADDRESS			CITY	STATE	IPOS ACODE	COLINTRY

135 SOUTH LASALLE STREET 4. This FINANCING STATEMENT covers the following collateral:

All Equipment and 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).

CHICAGO

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 [if applicable]	7. Check to REQUEST SEARCH REPO	RT(S) on Debtor(s) [optional]	All Debtors	Debtor 1 / Debtor 2
8. OPTIONAL FILER REFERENCE DATA Cook County		495	504-5	-

POSTAL JODE

60003

COUNTRY

USA

STATE

IL

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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 STATE	TEMENT				
9a. ORGANIZATION'S NAME					
OR 96. INDIVIDUAL'S LAST NAME LOIS	MIDDLE NAME, SUFFIX				
10. MISCELLANEOUS:					
				S FOR FILING OFF	ICE USE ONLY
11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL JAME - insert only one	debtor name (11a or 11b) - do not a	bbreviate or combin	e names		
11a. ORGANIZATION'S NAME					
OR 11b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE N	NAME	SUFFIX
11c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
11d. TAX ID #: SSN OR EIN ADD'L INFO RE ORGANIZATION ORGANIZATION DEBTOR	11f JURISDICTION OF ORGAN		11g. ORG	I SANIZATIONAL ID #, if a	any NONE
	AME - insert or ly or a name (12a c	r 12b)			
12a. ORGANIZATION'S NAME	46				
OR 12b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE N	IAME	SUFFIX
12b. INDIVIDUAL S CAST NAIME	PIRST NAME		MINDOLE	MAINE	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: LOT 31 (EXCEPT THE WEST 20 FEET THEREOF), LOT 32 AND LOT 33 IN BLOCK 2 IN BRUMMEL AND CASE HOWARD TERMINAL ADDITION, IN THE NORTHWEST QUARTER OF SECTION 30, TOWNSHIP 41 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS 	16. Additional collateral descript	ion:	T'S	0,5,0	
PIN 11-30-113-027-0000 ADDRESS: 801-03 CASE STREET, EVANSTON IL					
15. Name and address of a RECORD OWNER of above-described real estate (if Debtor does not have a record interest):					
	17. Check only if applicable and Debtor is a Trust or Trust 18. Check only if applicable and	tee acting with respo	ect to prop	erty held in trust or	Decedent's Estate
	Debtor is a TRANSMITTING				
	Filed in connection with a Ma	nufactured-Home T	ransaction	— effective 30 years	
	Filed in connection with a Pu	blic-Finance Transa	ction — eff	fective for 30 years	