INOFFICIAL 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) JH2 For JH2	
Corporation Service Company SUITE 2320 33 North LaSalle Street	
Chicago, IL 60602	_



Doc#: 0524119101 Fee: \$38.00

Eugene "Gene" Moore

Cook County Recorder of Deeds

Date: 08/29/2005 03:35 PM Pg: 1 of 8

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

	tt. Liversiete excembine names			
1. DEBTOR'S EXACT FULL LECAL NUME - insert only one debtor name (1a or 1b) - o	do not abbreviate or combine names	 —		
1a. ORGANIZATION'S NAME				
PHYSICIANS COOPER ATIVE PROPERTY OR 10. INDIVIDUAL SLASTNAME	MANAGEMENT LLC			Isuffix
OR 15 INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
				1
	ICITY	STATE	POSTAL CODE	COUNTRY
1c. MAILING ADDRESS		$ _{ m IL}$	60452	USA
5320 WEST 159TH STREET	OAK FOREST	1		
1d. SEE INSTRUCTIONS ADD'L INFO RE 1e. TYPE OF ORG. NIZATION	1f. JURISDICTION OF ORGANIZATION		ANIZATIONAL ID#, if any	
ORGANIZATION LLC	IL	₁ 5994	3707	NONE
DEBIOR	(On as 2h) do not obbroviate or combine	names		
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only the de-	nor name (2a or 2b) - do not apprevate or combin			
2a. ORGANIZATION'S NAME				
	()	MIDDLE	ALA BATT	SUFFIX
OR 2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	INAME	SULLY
	0/			
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
2c. MAILING ADDRESS	//×			
	AND	2a OP0	ANIZATIONAL ID#, if any	
2d. SEE INSTRUCTIONS ADD'L INFO RE 28. TYPE OF ORGANIZATION ORGANIZATION	2f. JURISDICTION OF CREANIZATION	2g. Orto	7 (112) (110) (7 L 12 M) (1 U.)	
DEBTOR				NONE
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P)	-insert only one secured party name ("ar ou			
3. SECURED PART 1 S NAME (GINAMEDITOTAL ASSISTAL EDITIONS NAME				
1	//			
STANDARD BANK & TRUST COMPANY	ICIDOTALANE	JNIDDLE	NAME	SUFFIX
OR 3b. INDIVIDUAL'S LAST NAME	FIRST NAME	O		
j		10		OOU WITTON
3c. MAILING ADDRESS	CITY	ST.\TE	POSTAL CODE	COUNTRY
7800 W 95TH ST	HICKORY HILLS	IL	₁ <i>6</i> 0457	USA

4. This FINANCING STATEMENT covers the following collateral:

All Inventory, Chattel Paper, Accounts, Equipment, Documents and General Intançibles; 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 other accounts proceeds).

	CONSIGNEE/CONSIGNOR BAILEE/BAILOR	SELLER/BUYER	AG, LIEN	NON-U	JCC FILING
	CONOCHEDOSINSICION				- · · · · ·
6. X This FINANCING STATEMENT is to be filed [for record] (or recorded) ESTATE RECORDS. Attach Addendum	[if applicable] [ADDITIONAL FEE]	[optional]	All Debtors	Debtor 1	Debtor 2
8. OPTIONAL FILER REFERENCE DATA					

IL-Cook County



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JCC FINANCING STATEMENT ADDENDUM			ı	
OLLOW INSTRUCTIONS (front and back) CAREFULLY	TEMENT			
9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STA 9a. ORGANIZATION'S NAME				
PHYSICIANS COOPERATIVE PROPERTY				
OR PHYSICIANS COOFFICE TYPE TO THE STREET NAME 9b. INDIVIDUAL'S LAST NAME FIRST NAME	MIDDLE NAME, SUFFIX			
10.MISCELLANEOUS: IL-Cook County				
15. Middle Madda 115-Cook Councy				
' O.				
70-	ì			
Q		THE ABOVE SPACE IS	FOR FILING OFFICE	USE ONLY
11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one				
11. ADDITIONAL DEBTOR'S EXACT FULL LEGAT NAVIE - INSERTION S DIE 1 11a. ORGANIZATION'S NAME	laine (11a of 11b) and the case			
Ox		_		
OR 115, INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE N	AME	SUFFIX
11c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
O			ANIZATIONAL ID #, if any	
11d. SEEINSTRUCTIONS ADDIL INFO RE 11e. TYPE OF ORGANIZATION ORGANIZATION	11f. JURISDICTION OF ORGANIZAT	ION 11g. ORG	ANIZATIONAL ID #, II any	
DEBTOR				NONE
	NAME - insert only one name (12a	or 12b)		
12a, ORGANIZATION'S NAME	46			
OR - INDIVIDUAL CLAST NAME	FIRST NAME	MIDDLE	IAME	SUFFIX
OR 12b. INDIVIDUAL'S LAST NAME	T INCO TO THE			
12c MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
12C. MAILING ADDRESS		6		
13. This FINANCING STATEMENT covers timber to be cut or as-extracted	16. Additional collateral description:		<u>' </u>	
collateral, or is filed as a X fixture filing.		4		
14, Description of real estate:		`S _		
UNITS NUMBER 3 AND 4 IN OAK CENTER				
CONDMINIUM NUMBER 1, AS DELINEATED ON			Sc.	
SURVEY OF THE FOLLOWING DESCRIBED		•		
PARCEL OF REAL ESTATE: THE SOUTH 64.19 FEET OF LOT 4; ALL OF	ļ		, C'O	
LOT 5; THE NORTH 120.81 FEET OF LOT 6;			C	
AND THE 20.00 FOOT VACATED ALLEY				
(- m.) 1 m.dd.om)				
(See Attached Addendum)				
15. Name and address of a RECORD OWNER of above-described real estate				
(if Debtor does not have a record interest):				
		1 4 4 4 4 4		
	17. Check <u>only</u> if applicable and ch Debtor is a Trust or Trust	eck <u>only</u> one box.	roperty held in trust or	Decedent's Estat
			noperty neid in dust or	Duoduein S Latat
	18. Check only if applicable and ch			
	Debtor is a TRANSMITTING U		in — effective 30 years	
	Filed in connection with a Pub			
	IDUM (FORM HCC1Ad) (REV		Corporation Ser 2711 Centervill	

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EMENT				
MIDDLE NAME, SUFFIX				
ame (11a or 11b) - do not abbrev			S FOR FILING OFFICE	USE ONLY
FIRST NAME		MIDDLE	NAME	SUFFIX
CITY		STATE	POSTAL CODE	COUNTRY
11f. JURISDICTION OF ORGA	NIZATION	11g. ORG	SANIZATIONAL ID #, if any	NON
NAME - ins art only one name	(12a or 12b)		<u>,</u>	w tr
FIRST NAME		MIDDLE	NAME	SUFFIX
CITY		STATE	POSTAL CODE	COUNTRY
16. Additional collateral descri	ription:	C		
17. Check only if applicable			property held in trust or	Decedent's Est
17. Check only if applicable and Debtor is a Trust or 18. Check only if applicable Debtor is a TRANSMITTI	Trustee acting with re and check <u>only</u> one bo	espect to	property held in trust or	Decedent's Est
	FIRST NAME CITY 11f. JURISDICTION OF ORGA NAME - ins art only one name FIRST NAME	THE ABOVE : ame (11a or 11b) - do not abbreviate or combine names FIRST NAME CITY [11f. JURISDICTION OF ORGANIZATION] NAME - in: art only one name (12a or 12b)	THE ABOVE SPACE IS THE ABOVE SPA	THE ABOVE SPACE IS FOR FILING OFFICE MIDDLE NAME THE ABOVE SPACE IS FOR FILING OFFICE THE ABOVE SPACE IS

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CC FINANCING STATEMENT ADDENDOWN LLOW INSTRUCTIONS (front and back) CAREFULLY			
NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STAT	EMENT		
9a. ORGANIZATION'S NAME			
PHYSICIANS COOPERATIVE PROPERTY	MIDDLE NAME, SUFFIX		
9b. INDIVIDUAL'S LAST NAME FIRST NAME	INDUCE IN MALE STATE		
.MISCELLANEOUS: IL-Cook County			
000			
' O.			
70-			
	THE	ABOVE SPACE IS FOR FILING OFF	ICE USE ONLY
		· · · · · · · · · · · · · · · · · · ·	<u> </u>
. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one na 11a. ORGANIZATION'S NAME	arrie (11a of 11b) - do not applemate of come		
O _x		MIDDLE NAME	SUFFIX
R 11b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDEE MANAGE	
		STATE POSTAL CODE	COUNTRY
Ic. MAILING ADDRESS	CITY	Sinte 1 Some Sta	
d SEF INSTRUCTIONS ADDIL INFO RE 11e. TYPE OF ORGANIZATION	1 11f, JURISDICTION OF ORGANIZATION	11g. ORGANIZATIONAL ID #, if	any
d. SEE INSTRUCTIONS ADD'L INFO RE 11e. TYPE OF ORGANIZATION	THE SERIES HE WE SEE THE SERIES HE S	1	
DEBTOR	101)		
2 ADDITIONAL SECURED PARTY'S QI ASSIGNOR S/P'S 12a ORGANIZATION'S NAME	NAME - ins art only one name (12a or 12b)		
12a. ORGANIZATIONS NAME	46		
R 12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
126. INDIVIDUAL'S EAST NAME	1		1
2c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
26. MAILING ADDRESS			
3. This FINANCING STATEMENT covers timber to be cut or as-extracted	16. Additional collateral description:	h/	
collateral, or is filed as a X fixture filing.		4	
4. Description of real estate:		',0	
THAT PART OF THE SOUTHEAST 1/4 OF THE			
SOUTHWEST 1/4 OF SAID SECTION 16 LYING		O _{FF}	
EAST OF THE EAST LINE OF SAID LOREL			
GARDENS SUBDIVISION; LYING WEST OF LOT			
12 IN A.T. McINTOSH AND COMPANY LARAMIE			
ACRES, A SUBDIVISION OF THE EAST 26-2/3			
ACRES OF THE			
(See Attached Addendum)			
, = = = = = =			
·			
5. 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 check or	nly one box.	T Docadanta m
		ing with respect to property held in trust	or Decedent's E
	18. Check only if applicable and check or	nly one box.	
	Debtor is a TRANSMITTING UTILITY		
	11 1	Harris Transportion — affective 30 year	E
	Filed in connection with a Manufactur	ance Transaction — effective 30 years	•

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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 STA	ATEMENT			
9a. ORGANIZATION'S NAME	AT ENGLISH I			
PHYSICIANS COOPERATIVE PROPERTY	7			
OR PHYSICIANS COOPERATIVE PROFERTY 9b. INDIVIDUAL'S LAST NAME FIRST NAME	MIDDLE NAME, SUFFIX			
10.MISCELLANEOUS: IL-Cook County				
		THE ABOVE SPA	E IS FOR FILING OF	FICE USE ONLY
11. ADDITIONAL DEBTOR'S EXACT FULL 'LEC AL NAME - insert only one	name (11a or 11b) - do not abbrevi	ate or combine names		
11a. ORGANIZATION'S NAME				
OR 11b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDE	LE NAME	SUFFIX
11c. MAILING ADDRESS	CITY	STAT	E POSTAL CODE	COUNTRY
11d. SEE INSTRUCTIONS ADD'L INFO RE 11e. TYPE OF ORGANIZATION OPERTOR	1 11f. JURISDICTION OF ORGAN	IZATION 11g.	DRGANIZATIONAL ID #, i	f any
12. ADDITIONAL SECURED PARTY'S of ASSIGNOR S/P'S	NAME ins rt only one name	(12a or 12b)		
12a. ORGANIZATION'S NAME	40			
OR 12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDE	LE NAME	SUFFIX
12c. MAILING ADDRESS	CITY	STA	E POSTAL CODE	COUNTRY
13. This FINANCING STATEMENT covers timber to be cut or as-extracted	16. Additional collateral descrip	otion:		
collateral, or is filed as a fixture filing. 14. Description of real estate:		Ti		
SOUTHEAST 1/4 OF THE SOUTHWEST 1/4 OF SAID SECTION 16; LYING NORTH OF THE NORTH LINE OF 159TH STREET; AND LYING SOUTH OF A LINE PARALLEL WITH AND 295.0 FEET NORTH OF THE NORTH LINE OF SAID 159TH STREET, ALL IN COOK COUNTY, ILLINOIS, WHICH			OFFICA	
(See Attached Addendum)				
15. Name and address of a RECORD OWNER of above-described real estate (if Debtor does not have a record interest):				
	17. Check <u>only</u> if applicable an			_
	Debtor is a Trust or T		to property held in trust	or Decedent's Estate
	18. Check <u>only</u> if applicable an			
	Debtor is a TRANSMITTING		ntion offostive 20 ver-	
	Filed in connection with a f			
	I ned in connection with a r	Tallo-I marioe manageron		ervice Company

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JCC FINANCING STATEMENT ADDENDU	М		
OLLOW INSTRUCTIONS (front and back) CAREFULLY NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING S	TATEMENT		
NAME OF FIRST DEBTOR (18 of 16) ON RELATED FINANCING S	TATEMENT		
	33.7		
PHYSICIANS COOPERATIVE PROPER TO 9b. INDIVIDUAL'S LAST NAME FIRST NAME	MIDDLE NAME, SUFFIX		
0.MISCELLANEOUS: IL-Cook County			
	THE	ABOVE SPACE IS FOR FILING (DFFICE USE ONLY
1. ADDITIONAL DEBTOR'S EXACT FULL 'LECAL NAME - insert only of 11a. ORGANIZATION'S NAME	ne name (11a or 11b) - do not abbreviate or comb	oine names	
0.5			
11b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
1d. SEE INSTRUCTIONS ADD'L INFO RE 11e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR	1 11f. JURISDICTION OF ORGANIZATION	11g. ORGANIZATIONAL ID	#, if any
	P'S NAME ins at only one name (12a or 12b)	
DR	*/ ₂ / ₂ / ₂	LUDBLE MANE	Tourn
126. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
3. This FINANCING STATEMENT covers timber to be cut or as-extract	ted 16. Additional collateral description:	<i>^</i> /	
collateral, or is filed as a 🙀 fixture filing.		T'	
4. Description of real estate:		'.0	
SURVEY IS ATTACHED AS EXHIBIT A-1 AND			
A-2 TO THE DECLARATION MADE BY BREMEN		U_{r}	
BANK AND TRUST COMPANY AS TRUSTEE UNDE	2	//:	
TRUST NO. 71-252, RECORDED IN THE		1/0	
OFFICE OF THE RECORDER OF COOK COUNTY, ILLINOIS AS DOCUMENT NO. 22365774;		Office	
(See Attached Addendum)			
15. Name and address of a RECORD OWNER of above-described real estate (if Debtor does not have a record interest):			
	17. Check <u>only</u> if applicable and check <u>or</u>		
	Debtor is a Trust or Trustee act		t or Decedent's Estat
	18. Check only if applicable and check or	<u>ily</u> one box.	
	Debtor is a TRANSMITTING UTILITY	and Home Tennestine - 45-45 - 20	rare
	·	ed-Home Transaction — effective 30 years	(a) (3)

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CC FINANCING STATEMENT ADDENDUM					
OLLOW INSTRUCTIONS (front and back) CAREFULLY NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STAT	EMENT				
9a. ORGANIZATION'S NAME					
PHYSICIANS COOPERATIVE PROPERTY 9b. INDIVIDUAL'S LAST NAME FIRST NAME	MIDDLE NAME, SUFFIX				
MISCELLANEOUS: IL-Cook County		i			
	(410 or 11b) do not abbrei		ACE IS FOR	FILING OFFICE	USE ONLY
1. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one no 11a. ORGANIZATION'S NAME	ame (Tra of Trb) - do not abbres	iate of complite figures	<u>-</u> ·		
Ox					Telleriv
11b. INDIVIDUAL'S LAST NAME	FIRST NAME	M	DDLE NAME		SUFFIX
1c. MAILING ADDRESS	CITY			AL CODE	COUNTRY
1d. SEE INSTRUCTIONS ADD'L INFO RE 11e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR	11f. JURISDICTION OF ORGA	NIZATION 1	g. ORGANIZA	TIONAL ID#, if any	NO
ASSIGNOR S/P'S	NAMF - ins art only <u>one</u> name	(12a or 12b)			
2. ADDITIONAL SECURED PART TO OF ASSIGNMENT OF STATE ASSIGNMENT OF					
	40				
12b. INDIVIDUAL'S LAST NAME	FIRST NAME	N	IDDLË NAME		SUFFIX
12c. MAILING ADDRESS	CITY		TATE POST	AL CODE	COUNTRY
	46 4 100 1 0 4 4 4 4	disting O			
3. This FINANCING STATEMENT covers timber to be cut or as-extracted	16. Additional collateral desc	iipuori.			
collateral, or is filed as a fixture filing.		1/6			
4. Description of real estate:		0.			
TOGETHER WITH AN UNDIVIDED PERCENTAGE			0//		
INTEREST IN THE COMMON ELEMENTS IN COOK			UK.		
COUNTY, ILLINOIS.				*	
PIN: 28-16-305-008-1003 and					
28-16-305-008-1004				- (0)	
Common Address: 5320 W. 159th Street,					
Oak Forest, Illinois 60452					
15. Name and address of a RECORD OWNER of above-described real estate					
(if Debtor does not have a record interest):					
	17. Check <u>only</u> if applicable			_	1
	Debtor is a Trust or	Trustee acting with res	pect to propert	y held in trust or	Decedent's Es
	18. Check only if applicable	and check <u>only</u> one box.			
	Debtor is a TRANSMITT	ING UTILITY			
		a Manufactured-Home T	ansaction — e	ffective 30 years	
		a Public-Finance Transa			
	I Fried in connection with	a r apilo-t marice framea			ice Company

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UNOFFICIAL CO

ATEMENI	TAMENDMENT ADDENDUM
UCC FINANCING STATEWARD FOLLOW INSTRUCTIONS (front and back) CAP	AEFULLY
11. INITIAL FINANCING STATEMENT THE	0/28/2003
0330110139, FILED 1 12, NAME OF PARTY AUTHORIZING THIS AI	MENOMENT (same as liem 9 on Amendmen norm)
CTTTO ANK ESB.	FIRST NAME MIDDLE NAME, SUFFIX
13. Use this space for additions' unit (mation	

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

UNITS NUMBER 3 AND 4 IN CAK CENTER CONDOMINIUM NUMBER 1, AS DELINEATED ON SURVEY OF THI! FOLLOWING DESCRIBED PARCEL OF REAL ESTATE: THE SOUTH 64.19 FEET OF LOT 4; ALL OF LOT 5; THE NORTH 120.81 FEET OF LOT 6; AND THE 20.00 FOOT VACATED ALLEY LYING BETWEEN LOTS SAND 6 IN LOREL GARDENS SUBDIVISION OF THE EAST 300 FEET OF THE SOUTH 675.81 FEET CF THE WEST 13 1/3 ACRES OF THE SOUTH EAST 1/4 OF SOUTHWEST 1/4 OF SECTION 16, TOVINSTIP 36 NORTH, RANGE 13 EAST OF THE THIRD PRINCIPAL MERIDIAN; AND THAT PART OF THE SOUTH EAST 1/4 OF THE SOUTHWEST 1/4 OF SAID SECTION 16 LYING EAST OF THE EAST LINE OF SAID LOREL GARDENS SUBDIVISION; LYING WEST OF LOT 12 IN A.T. MCINTOSH AND COMPANY LARAMIE ACRES, A SUBDIVISON OF THE EAST 26 2/3 ACRES OF THE SOUTH EAST 1/4 OF THE SOUTHWEST 1/4 OF SAID SECTION 16; LYING NORTH OF THE NORTH LINE OF 159TH STREET; AND LYING SOUTH OF A LINE PARALLEL WITH AND 295.0 FEET NORTH OF THE NORTH LINE OF SAID 159TH STREET, ALL IN COOK COUNTY, ILLINOIS, WHICH SURVEY IS ATTACHED AS EXHIBIT "A"-1 AND "A"-2 TO THE DECLARATION MADE BY BREMEN BANK AND TRUST COMPANY AS TRUSTEE UNDER TRUST NO. 252, AND RECORDED AS DOCUMENT NO 22365774; TOGETHER WITH AN UNDIVIDED PERCENTAGE INTEREST IN THE COMMON ELENGATS, IN COOK COUNTY, SOME OFFICE ILLINOIS.

Commonly known as: 5320 West 159th, Oak Forest, IL

Pin #: 28-16-305-008-1003-UNIT 3

28-16-305-008-1004-UNIT 4