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UCC FINANCING STATEMENT

A. NAME & PHONE OF CONTACT AT FILER [optional]

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

PARKWAY BANK & TRUST CO.
4800 N. HARLEM AVE.
HARWOOD HEIGHTS, IL 60706

Doc#: 0603743148 Fee: \$28.00 Eugene "Gene" Moore RHSP Fee:\$10.00 Cook County Recorder of Deeds Date: 02/08/2006 07:29 AM Pg: 1 of 3

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

			THE ABOVE O	AOLIGIC	ACTIENTS STITISE SSE	CITET	
1. DEBTOR'S EXACT	FULL LEGAL NAME	- insert only one debtor name (1a o	r 1b) - do not abbreviate or combine names				
1a. ORGANIZATION'S					W		
NORTHLA	KE PETKO)	FUM CORP., AN I	LLINOIS CORPORATION	1			
OR 1b. INDIVIDUAL'S LAS	ST NAME	- A-	FIRST NAME	MIDDLE	MIDDLE NAME		
		11-					
1c. MAILING ADDRESS			CITY	STATE	1 1		
9739 WEST IF	RVING PAR	K ROAD	SCHILLER PARK	IL	60176		
1d. SEE INSTRUCTIONS		1e. TYPE OF ORGANIZ TICN	1f. JURISDICTION OF ORGANIZATION		1g. ORGANIZATIONAL ID #, if any		
	ORGANIZATION DEBTOR	CORPORATION	, IL	₁ 6443	30688	NONE	
2 ADDITIONAL DERT		LEGAL NAME insert only and	tor name (2a or 2b) - do not abbreviate or combin	na names		TINONE	
2a. ORGANIZATION'S		LEGAL IVAIVIL - IIISER OIIIY LE 20	that ite (2a of 2b) - do not abbreviate of combin	ie ilanies			
			T				
OR 2b. INDIVIDUAL'S LAST NAME			FIRST NAME	[MIDDLE	MIDDLE NAME		
25. INDIVIDUALE O EAC	71 14/ML		The Trumb	1	WINDSEC 17 WILL		
			<u> </u>		_		
2c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY	
			1/2%				
2d. SEE INSTRUCTIONS		2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF O' GA NIZATION	2g. ORG	ANIZATIONAL ID #, if any	•	
	ORGANIZATION DEBTOR	1		i		□ NONE	
3 SECURED BARTY	"S NAME (or NAME)	A TOTAL ACCIONEE AS ACCIONOD	S/P) - insert only one secured party na (3. or 3b	<u> </u>		1 INONE	
3a. ORGANIZATION'S		DE TOTAL ASSIGNEE OF ASSIGNOR	5/P) - Insert only one secured party ha. (5.1 or 5.	<u> </u>		· · · · · · · · · · · · · · · · · · ·	
	BANK & T	RUST CO	Cy	4/			
OR 3b. INDIVIDUAL'S LAS		1001 00.	TFIRST NAME	TMIDDLE	NIANACE	SUFFIX	
39. INDIVIDUAL S LAST INAIVIE			FIRST NAIVIE	WIIDOLE	SUPPIX		
				9	IPOS TAL CODE		
3c. MAILING ADDRESS			CITY	STATE	COUNTRY		
4800 N. HARLEM AVE.			HARWOOD HEIGHTS		00706	USA	

4.	This FINANCING	STATEMENT	covers the	following	collateral:
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Purchase Money Security Interest in all Inventory, Chattel Paper, Accounts, Equipment, General Intangibles 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 other accounts proceeds).

5. ALTERNATIVE DESIGNATION [if applicable]:	LESSEE/LESSOR	CONSIGNEE/C	ONSIGNOR	BAILEE/BAILOR	SELLER/BUYER	AC	G. LIEN	NON-I	JCC FILING
6. This FINANCING STATEMENT is to be filed ESTATE RECORDS. Attach Addendum	[for record] (or recorded)	in the REAL 7.	Check to REQU [ADDITIONAL FI	EST SEARCH REPO EE]	RT(S) on Debtor(s) [optional]	All De	ebtors	Debtor 1	Debtor 2

8. OPTIONAL FILER REFERENCE DATA

1917 333-CD

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	C FINANCING ST								
	OW INSTRUCTIONS (from AME OF FIRST DEBTOR		FULLY LATED FINANCING STAT	EMENT					
9a. ORGANIZATION'S NAME NORTHLAKE PETROLEUM CORP., AN ILLINOIS CO					3.00				
ORL	9b. INDIVIDUAL'S LAST NAME			NAME, SUFFIX					
					,				
10. N	/ISCELLANEOUS:								
11. /		S EXACT FULL LEG	5^⊊ NAME - insert only <u>one</u> n	ame (11a or 11l	b) - do not abbrev			S FOR FILING OF	FICE USE ONLY
ſ	11a. ORGANIZATION'S NAME								
OR	11b. INDIVIDUAL'S LAST NAM	ΛE	0x	FIRST NAME			MIDDLE I	NAME	SUFFIX
11c.	MAILING ADDRESS		0,	CITY			STATE	POSTAL CODE	COUNTRY
11d.	OF	DD'L INFO RE 11e. RGANIZATION EBTOR	TYPE OF ORGANIZATION	Jaf. JURISDIC	CTION OF ORGA	NIZATION	11g. ORG	I SANIŽATIONAL ID #,	if any
12.	ADDITIONAL SECURI		ASSIGNOR S/P'S	NAM inse	rt only <u>one</u> name	(12a or 12b)			
	12a. ORGANIZATION'S NAME	<u> </u>		C	6.				
OR	12b. INDIVIDUAL'S LAST NAM	ИE		FIRST NAME	7 7×,	·	MIDDLE	NAME	SUFFIX
12c.	MAILING ADDRESS			CITY			STATE	POSTAL CODE	COUNTRY
c	This FINANCING STATEMENT collateral, or is filed as a filed secription of real estate:	L	be cut or as-extracted	16. Additiona	i collateral descri	ption:	2		
SC	OT 4 IN MIDLAI DRTHLAKE VILLAGE DUTHWEST 1 /4 OF TH DWNSHIP 39 NORTH, RINCIPAL MERIDIAN, I	UNIT NO.9, A S IE NORTHWEST RANGE 12, EA	SUBDIVISION IN THE T 1/4 OF SECTION 5, ST OF THE THIRSD				(Office	
No.	Name and address of a RECOF if Debtor does not have a recor orthlake Petroleum Cor	rd interest): rp., an Illinois C							
9739 West Irving Park Road Schiller Park, IL 60176					nd check only one bo				
						rustee acting with res		perty held in trust	or Decedent's Estate
					<u>iy</u> ii applicable ar a TRANSMITTINO		ο.		
				I I		Manufactured-Home	Transaction	n - effective 30 years	
				Filed in co	onnection with a F	Public-Finance Trans	action - eff	ective for 30 years	

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CHICAGO TITLE INSURANCE COMPANY

ORDER NUMBER: 1409 008318855 NSC STREET ADDRESS: 2 E. LAKE STREET

CITY: NORTHLAKE COUNTY: COOK

TAX NUMBER: 15-05-101-013-0000

LEGAL DESCRIPTION:

LOT 4 IN MIDLAND DEVELOPMENT COMPANY'S NORTHLAKE VILLAGE UNIT NO. 9, A DA THE SU EAST COLUMN CLERK'S OFFICE SUBDIVISION IN THE SOUTHWEST 1/4 OF THE NORTHWEST 1/4 OF SECTION 5, TOWNSHIP 39 NORTH, RANGE 12 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

LEGALD MT4 01/27/06