UNOFFICIAL COPY



UCC FINANCING STATEMENT AMENDMENT

State Form 50182 (5-01) Approved by State Board of Accounts, 2001

FOLLOW INSTRUCTIONS (front and back) CAREFULLY



Doc#: 0616722007 Fee: \$26.50 Eugene "Gene" Moore RHSP Fee:\$10.00 Cook County Recorder of Deeds

- 06/16/2006 10:58 AM Pa: 1 of 1

FFOM MOLICOGUENO (NOW THE THEN)		Date: 06/16/2006 10:56 AM	rg, tott
NAME AND PHONE OF CONTACT AT FILER (optional)			
Danelle Battista 866 868-6365			
SEND ACKNOWLEDGMENT TO: (Name and Address)			
	-		
Equity One	1		
910 Berlin Rd. #5A			
Voorhees, NJ 08043			
	(ļ		
	THE ABOVE	SPACE IS FOR FILING OFFICE US	SE ONLY
	INE ABOVE	AL THE CINANCING STATEMENT A	MENDMENT is
INITIAL FINANCING STATE WENT FILE #		to be filed (for record) (or re	Corded) III the
Ctatement identified above is tel	minated with respect to security interest(s) of t	he Secured Party authorizing this Termination S	tatement.
TERMINATION: Effectiveness of the Finar and Statement identified above with CONTINUATION: Effectiveness of the Finar and Statement identified above with the Continuation of the Continuat	h respect to security interest(s) of the Secured	Party authorizing this Continuation Statement is	s
continued for the additional period provided by application and			
20 continue of application and addr	ess of assignee in item 7c; and also give name	of assignor in Item 9.	<u> </u>
AMENIDMENT (PARTY INFORMATION): This Amendment affects Debtor	or Secured Party of records billion only o	ne of these two boxes.	
Also chack one of the following three boxes and provide appropriate information in items	o and roi i.	ADD name: Complete item	7a or 7b, and also
CHANGE name and/or address: Give current record name in item >a or 3b; also name (if name change) in item 7a or 7b and/or new address (if address or name).	diverse L Dece -		7d-7g (if applicable)
CURRENT RECORD INFORMATION:			
6a. ORGANIZATION NAME			
		, MIDDLE NAME	SUFFIX
66. INDIVIDUAL'S LAST NAME TIL 200	Garden d Kenda	M	
1 HD111 HS	M 2 4 1 10 04		
CHANGED (NEW) OR ADDED INFORMATION:			
7a. ORGANIZATION NAME			
	FIRST NAME	MIDDLE NAME	SUFFIX
7b. INDIVIDUAL'S LAST NAME	THIS TO THE		
	CITY	STATE POSTAL CODE	COUNTRY
c. MAILING ADDRESS .			
ADD'LINFO RE 7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZAT	O' 7g. ORGANIZATIONAL ID #, if	any NONE
ORGANIZATION DEBTOR			U NONE
. AMENDMENT (COLLATERAL CHANGE): check only one box Describe collateXXXX deleted or added, or give entire restated collateral deleted.	escription, or describe collateral 🔲 assigned		
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	WHE SOUTH BASE 7	OF DECEMON AL	•
	NZHIE 31 NOVIII	MARIOD 127)F.
THE THIRD PRINCIPAL MERIDIAN,	IN COOK COUNTY I	LLINOIS.	
THE THIRD TRINGITIES HELDER			
		Chic	000,16.
PIN- 25-08-213-0	SZ alors	Sangamon Ave.	6069
		-i	by a Debtor which
NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMI adds collateral or adds the authorizing Debtor, or if this is a Termination authorized	NDMEN I (name of assignor, in this to annually a Debtor, check here and enter name	e of DEBTOR authorizing this Amendment.	
adds collateral or adds the authorizing Deptor, or it this is a Terrimination			
9a. ORGANIZATION NAME			OUES
Equity One, Inc.	FIRST NAME	MIDDLE NAME	SUFFIX
OR 9b. INDIVIDUAL'S LAST NAME			
		ACCT# 3784 - /	4508002
10. OPTIONAL FILER REFERENCE DATA	\D\$\\	ACCT# 3/87-1	
NNN	101	4-2-6	6
FILING OFFICE COPY - INDIANA UCC FINANCING AMENOMENT		Date	