

# UNOFFICIAL COPY



0633310006

Doc#: 0633310006 Fee: \$26.50  
Eugene "Gene" Moore RHSP Fee: \$10.00  
Cook County Recorder of Deeds  
Date: 11/29/2006 09:36 AM Pg: 1 of 2

## UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]  
**UCC COORDINATOR (813) 881-1988 \*230**

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

**I.S.P.C.  
 6420 BENJAMIN ROAD  
 TAMPA, FLORIDA 33634-5119**

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

OR

1b. INDIVIDUAL'S LAST NAME: **BARNEY**      FIRST NAME: **CHRISTINE**      MIDDLE NAME:      SUFFIX:

1c. MAILING ADDRESS: **220 IRIS DR**      CITY: **STREAMWOOD**      STATE: **IL**      POSTAL CODE: **60107222**      COUNTRY: **US**

1d. TAX ID #: SSN OR EIN      ADD'L INFO RE ORGANIZATION DEBTOR      1e. TYPE OF ORGANIZATION      1f. JURISDICTION OF ORGANIZATION      1g. ORGANIZATIONAL ID #, if any  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: **BARNEY**      FIRST NAME: **GARY**      MIDDLE NAME:      SUFFIX:

2c. MAILING ADDRESS: **220 IRIS DR**      CITY: **STREAMWOOD**      STATE: **IL**      POSTAL CODE: **60107222**      COUNTRY: **US**

2d. TAX ID #: SSN OR EIN      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: **I.S.P.C.**

OR

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

3c. MAILING ADDRESS: **6420 BENJAMIN ROAD**      CITY: **TAMPA**      STATE: **FL**      POSTAL CODE: **33634-5112**      COUNTRY: **US**

4. This FINANCING STATEMENT covers the following collateral

**Water Cond Equipment**

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) ADDITIONAL FEE [optional]  All Debtors  Debtor 1  Debtor 2

8. OPTIONAL FILER REFERENCE DATA

**COOK, IL I.S.P.C. FILE # 690030**

sc  
m  
y  
2006

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

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

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

9a. ORGANIZATION NAME

OR

9b. INDIVIDUAL'S LAST NAME

**BARNEY**

FIRST NAME

**CHRISTINE**

MIDDLE NAME, SUFFIX

**10. MISCELLANEOUS:****COOK, IL****ISPC FILE # 690030**

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FILING OFFICE COPY - UCC FINANCING STATEMENT (FORM UCC1)(REV. 05-22-02)

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

11a. ORGANIZATION'S NAME

OR

11b. INDIVIDUAL'S LAST NAME

**BARNEY**

FIRST NAME

**GARY**

MIDDLE NAME

SUFFIX

**11c. MAILING ADDRESS****220 IRIS DR**

CITY

**STREAMWOOD**

STATE

**IL**

POSTAL CODE

**60107222**

COUNTRY

**US****11d. TAX ID #: SSN OR EIN**ADD'L INFO RE  
ORGANIZATION  
DEBTOR**11e. TYPE OF ORGANIZATION****11f. JURISDICTION OF ORGANIZATION****11g. ORGANIZATIONAL ID #, if any** NONE**12.  ADDITIONAL SECURED PARTY'S or  ASSIGNOR S/P'S NAME - insert only one debtor name (12a or 12b)**

12a. ORGANIZATION'S NAME

**I.S.P.C.**

OR

12b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

**12c. MAILING ADDRESS****6420 BENJAMIN ROAD**

CITY

**TAMPA**

STATE

**FL**

POSTAL CODE

**33634**

COUNTRY

**US****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:**

PARCEL ID. 06 24 316 011, LOT 55, IN THE MEADOW PHASE 1, BEING SUB'D IN PART OF SW ¼ OF SEC 24 TWP 41 N RGE 9 EAST OF 3<sup>RD</sup> PRINCIPAL MERIDIAN COOK COUNTY, ILLINOIS

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

**CHRISTINE BARNEY  
GARY BARNEY  
220 IRIS DR  
STREAMWOOD, IL 601072222**

**17. Check only if applicable and check only one box.**Debtor is a  Trust or  Trustee acting with respect to property held in trust  Decedent's Estate**18. Check only if applicable and check only one box.** Debtor is a TRANSMITTING UTILITY Files in connection with a Manufactured-Home Transaction - effective 30 years Filed in connection with a Public-Finance Transaction - effective 30 years