### **UNOFFICIAL COPY**

10. MAILING ADDRESS  5102 W. Laurel Street, Suite 700  10. Tampa  10. Tampa  11. Type of organization   Imited liability co.   Injurisolation of organization   Imited liability co.   Injurisolation of organization   Imited liability co.   Injurisolation of organization   Injurisolation	UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional]	- ·	ne "Gene"	918072 Fee: \$6 Moore RHSP Fee ecorder of Deeds 07 03:27 PM Pg:	,ψ10.00
1. DEBTOR'S EXACT FULL LEGAL NAME   FIRST NAME   MIDDLE NAME   SUFFIX    1. MAILING ADDRESS   STATE   POSTAL CODE   COUNT    1. MAILING ADDRESS   STATE   POSTAL CODE   COUNT    1. MAILING ADDRESS   STATE   POSTAL CODE   COUNT    1. TAX ID #: SSN OR EIN   ADDLINFO RE   1.0. TYPE OF ORGANIZATION   DEBTOR   Ilimited   Idability co.   Delaware    2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only ong debtor name (2.0. (2.0) - do not abbreviate or combine names    2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only ong debtor name (2.0. (2.0) - do not abbreviate or combine names    2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only ong debtor name (2.0. (2.0) - do not abbreviate or combine names    2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only ong debtor name (2.0. (2.0) - do not abbreviate or combine names    2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only ong debtor name (2.0. (2.0) - do not abbreviate or combine names    2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only ong debtor name (2.0. (2.0) - do not abbreviate or combine names    2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only ong debtor name (2.0. (2.0) - do not abbreviate or combine names    2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only ong debtor name (2.0. (2.0) - do not abbreviate or combine names    2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only ong debtor name (2.0. (2.0) - do not abbreviate or combine names    2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only ong debtor name (2.0. (2.0) - do not abbreviate or combine names    2. ADDITIONAL DEBTOR   Ilimited partnership   Delaware    3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR SIP) - insert only ong secured party name (3.0 or 3.0)    3. ADDITIONAL DEBTOR   Ilimited partnership   Delaware    3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR SIP) - insert only ong secured party name (3.0 or 3.0)    3. ADDITIONAL DEBTOR   Ilimited partnership   Delaware    3. SECURED PART	B. SEND ACKNOWLEDGMENT TO: (Name and Address)  Latham & Watkins LLP  650 Town Center Drive, Suite 2000  Costa Mesa, California 92626				e e
WHHB1 Realty, L.L.C.  OR 15. INDIVIDUAL'S LAST NAME  WHHB1 Realty, L.L.C.  OR 15. INDIVIDUAL'S LAST NAME  FIRST NAME  FIRST NAME  MIDDLE NAME  SUFFIX  STATE POSTAL CODE COUNT  Tampa  FL 33607  US.  1d. TAX ID #: SSN OR EIN ORGANIZATION Individual STATE Individu	DEBTOR'S EXACT FULL LEGAL NAME insert only one debtor name (*)	THE ABOVE	SPACE IS FO	OR FILING OFFICE US	E ONLY
The individual's last name    The individual's last name   The state   The sta	1a. ORGANIZATION'S NAME	Vi SVIIII III III		, , , , , , , , , , , , , , , , , , ,	
5102 W. Laurel Street, Suite 700  Tampa  1d. TAX ID #: SSN OR EIN   ADD'L INFO RE   1st. TYPE OF ORGANIZATION   Ilimited liability co.   Delaware    2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only gag debtor name   2s to 2b) - do not abbreviate or combine names  2a. ORGANIZATION'S NAME   WHBHT Real Estate Limited Partnership  OR   2b. INDIVIDUAL'S LAST NAME   FIRST NAME   FIRST NAME   MIDDLE NAME   SUFFIX    2b. INDIVIDUAL'S LAST NAME   ADD'L INFO RE   2e. TYPE OF ORGANIZATION   2r. JURISDICTION OF ORGANIZATION   2g. ORGANIZATIO		FIRST NAME	MIDDLE	NAME	SUFFIX
Id. TAX ID #: SSN OR EIN   ADD'L INFO RE   16. TYPE OF ORGANIZATION   19. ORGANIZATION			STATE	POSTAL CODE	COUNTRY
ORGANIZATION   limited liability co.   Delaware   Debtor   Delaware   Debtor   Delaware   Debtor   Delaware   Debtor   Delaware   Debtor   Delaware   De					USA
WHBHT Real Estate Limited Partnership  OR  2b. Individual's Last Name    First Name   First Name   Middle Name   Suffix	ORGANIZATION		19. ORG	iANIZATIONAL ID#, if any	Non
WHBHT Real Estate Limited Partnership  2b. INDIVIDUAL'S LAST NAME    FIRST NAME   MIDDLE NAME   SUFFIX   STATE   POSTAL CODE   COUNT	2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one	debtor name (∠a c/2b) - do not abbreviate or comb	ine names		NOF
2b. INDIVIDUAL'S LAST NAME  FIRST NAME  FIRST NAME  FIRST NAME  MIDDLE NAME  SUFFIX  C. MAILING ADDRESS  5102 W. Laurel Street, Suite 700  Tampa  Tampa  Tampa  FL 33607  USA  TAX ID #: SSN OR EIN   ADDL INFO RE   2e. TYPE OF ORGANIZATION   2f. JURISDICTION OF ORGANIZATION   2g. ORGANIZATIONAL ID #, If any   DEBTOR   Iimited partnership   Delaware  S. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - Insert only one secured party name (3a or 3b)  A. ORGANIZATION'S NAME  HCP HB2 Waterside Retirement Estates, LLC  3b. INDIVIDUAL'S LAST NAME  FIRST NAME  MIDDLE NAME  SUFFIX  C. MAILING ADDRESS  C. MAILING	= · · · · · · · · · · · · · · · · · · ·				
Committing address  Committing address  City  Tampa  Tampa  FL 33607  USA  City  Tampa  FL 33607  USA  City  Tampa  FL 33607  FL 33607  USA  City  Tampa  FL 33607  City  Tampa  FL 33607  City  Tampa  FL 33607  City  Tampa  FL 33607  City  Tampa  Postal code  FL 33607  City  Tampa  Total assigner of Count only one secured party name (3a or 3b)  Tampa  Tampa  FL 33607  City  Tampa  Tampa  FL 33607  City  Tampa  Tampa	26. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
5102 W. Laurel Street, Suite 700  Tampa  DEBTOR  DEBTO		4/)*			
ADDL INFO RE ORGANIZATION DEBTOR   20. TYPE OF ORGANIZATION   27. JURISDICTION OF ORGANIZATION   29. ORGANIZATIONAL ID #, If any Debtor   1 limited partnership   Delaware   29. ORGANIZATIONAL ID #, If any Debtor   1 limited partnership   Delaware   29. ORGANIZATIONAL ID #, If any Debtor   29. ORGANIZATIONAL ID #, If any De		CITY	STATE	POSTAL CODE	COUNTRY
ORGANIZATION DEBTOR limited partnership Delaware  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  HCP HB2 Waterside Retirement Estates, LLC  3b. INDIVIDUAL'S LAST NAME  FIRST NAME  MIDDLE NA'.E  SUFFIX  C. MAILING ADDRESS  C. MAILING A				33607	USA
SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)    Sa. ORGANIZATION'S NAME	5102 W. Laurel Street, Suite 700	Tampa	FL	-1	
3a. ORGANIZATION'S NAME  HCP HB2 Waterside Retirement Estates, LLC  Bit INDIVIDUAL'S LAST NAME  SUFFIX  CITY  THE POSTAL COLF  COUNT  TO Kilroy Airport Way, Suite 300  STATE POSTAL COLF  COUNT  CA 90806  USA	5102 W. Laurel Street, Suite 700 d. TAX ID #: SSN OR EIN   ADD'L INFO RE   20. TYPE OF ORGANIZATION   ORGANIZATION	2f. JURISDICTION OF ORGANIZATION		ANIZATIONAL ID#, if any	
SUFFIX SUFFIX SUFFIX SUFFIX SUFFIX STATE POSTAL CLUE COUNT TO Kilroy Airport Way, Suite 300 Long Beach CA 90806 USA	5102 W. Laurel Street, Suite 700 d. TAX ID #: SSN OR EIN   ADD'LINFO RE   20. TYPE OF ORGANIZATION   ORGANIZATION   limited partnership	21. JURISDICTION OF ORGANIZATION Delaware	2g. ORG	ANIZATIONAL ID #, if any	Пион
SUFFIX  C. MAILING ADDRESS  G. TOTY  Long Beach  CA 90806  USA  SUFFIX  COUNT  CA 90806  USA	5102 W. Laurel Street, Suite 700  d. TAX ID #: SSN OR EIN   ADD'L INFO RE   20. TYPE OF ORGANIZATION ORGANIZATION   Limited partnership  SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNEE	21. JURISDICTION OF ORGANIZATION Delaware	2g. ORG	ANIZATIONAL ID#, if any	
760 Kilroy Airport Way, Suite 300 Long Beach CA 90806 USA	5102 W. Laurel Street, Suite 700  of TAX ID #: SSN OR EIN ORGANIZATION ORGANIZATION ORGANIZATION   limited partnership    SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNCE ORGANIZATION'S NAME    HCP HB2 Waterside Retirement Estates, LI	2f. JURISDICTION OF ORGANIZATION Delaware  OR S/P) - insert only one secured party name (3a or 3)	2g. ORG	ANIZATIONAL ID#, if any	Non
760 Kilroy Airport Way, Suite 300 Long Beach CA 90806 USA	5102 W. Laurel Street, Suite 700  of TAX ID #: SSN OR EIN ORGANIZATION ORGANIZATION ORGANIZATION   limited partnership    SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNCE ORGANIZATION'S NAME    HCP HB2 Waterside Retirement Estates, LI	2f. JURISDICTION OF ORGANIZATION Delaware OR S/P) - insert only one secured party name (3a or 3	2g. ORG		SUFFIX
70000 0 002	5102 W. Laurel Street, Suite 700  d. TAX ID #: SSN OR EIN   ADDL INFO RE   20. TYPE OF ORGANIZATION ORGANIZATION   Limited partnership  SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNCE   3a. ORGANIZATION'S NAME   HCP HB2 Waterside Retirement Estates, LI  B. INDIVIDUAL'S LAST NAME	21. JURISDICTION OF ORGANIZATION Delaware  OR S/P) - insert only one secured party name (3a or 3)  LC FIRST NAME	2g. ORG		
The FINANCIAL OT ATTAINED	5102 W. Laurel Street, Suite 700  of TAX ID#: SSN OR EIN   ADDL INFO RE   20. TYPE OF ORGANIZATION ORGANIZATION   limited partnership  SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNO   3a. ORGANIZATION'S NAME  HCP HB2 Waterside Retirement Estates, LI 3b. INDIVIDUAL'S LAST NAME	21. JURISDICTION OF ORGANIZATION Delaware  DR S/P) - insert only one secured party name (3a or 3)  LC FIRST NAME	2g, ORG	NAVIE	SUFFIX
THIS FRANCING STATEMENT COVERS the following collateral;	5102 W. Laurel Street, Suite 700  of TAX ID#: SSN OR EIN   ADDL INFO RE   20. TYPE OF ORGANIZATION ORGANIZATION   limited partnership  SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNO   3a. ORGANIZATION'S NAME  HCP HB2 Waterside Retirement Estates, LI 3b. INDIVIDUAL'S LAST NAME	21. JURISDICTION OF ORGANIZATION Delaware  DR S/P) - insert only one secured party name (3a or 3)  LC FIRST NAME	2g, ORG	NAVIE	SUFFIX

This Financing Statement is to be filed in the real estate records in the County of Cook, State of Illinois.

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 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s)  All Debtors	
	Debtor 1Debtor 2
8, OPTIONAL FILER REFERENCE DATA	-1
Cook County, Illinois Precautionary (012910-0592) [Olympia Fields]	011
Cook County, Inmois i recautionary (012910-0392) [Olympia Fields]	713287- 04

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UCC FINANCING STATEM			J			
9. NAME OF FIRST DEBTOR (1a or 1b) C		TEMENT	ł			
9a. ORGANIZATION'S NAME	THE PHANTON OF	TEMENT	1			
WHHB1 Realty, L.L.C.						
96. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX				
10. MISCELLANEOUS:	<del> </del>					
44 ADDITIONAL DEPTODIS SWEET FOR		·	THE ABOVE	E SPACE	IS FOR FILING O	FFICE USE ONLY
11. ADDITIONAL DEBTOR'S EXACT FULL	LEGAL NAME insert only one n	ame (11a or 11b) - do not abbre				THE BOD ONE.
11a. ORGANIZATION'S NAME Senior Lifestyle Newport Limi		and (178 of 118) and the about	NATO OF COMMUNICATION	<del></del>		
OR 11b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE	NAME	SUFFIX
						301713
11c. MAILING ADDRESS		1  C  Y		STATE	POSTAL CODE	COUNTRY
5102 W. Laurel Street, Suite 700		Tan pa		FL	33607	USA
11d. TAX ID #: SSN OR EIN ADD'L INFO RE	11e. TYPE OF ORGANIZATION	11f. JUNICOICTION OF ORGA	NIZATION	11g. ORG	ANIZATIONAL ID#	
ORGANIZATION DEBTOR	limited partnership	Delaware		†		None
12. X ADDITIONAL SECURED PARTY'S	S of ASSIGNOR S/P'S	NAME - insert only rue name	(12a or 12h)	1		TINOME
12a. ORGANIZATION'S NAME						
HCP HB2 Park at Golf Mill, L	LC					
126. INDIVIDUAL'S LAST NAME		FIRST NAME	C	MIDDLE	NAME	SUFFIX
12c. MAILING ADDRESS	•	CITY	(2)		POSTAL CODE	COUNTRY
3760 Kilroy Airport Way, Suite 30	00	Long Beach		CA	90806	USA
<ul> <li>13. This FINANCING STATEMENT covers time collateral, or is filed as a fixture filling.</li> <li>14. Description of real estate:</li> <li>See Schedule 1 attached hereto are herein by this reference.</li> </ul>	ber to be cut or as-extracted	16. Additional collateral descri	ption:	<b>'</b> '		
					-	<b>Y</b>
<ol> <li>Name and address of a RECORD OWNER of at (if Debtor does not have a record interest):</li> </ol>	·					
HCP HB2 Greenwich - East-West	Bay - Olympia Fields,	17. Check only if applicable and	I chack colu e be		······································	
LLC		Debtor is a Trust or Tr		nect to pro	norty held in truck	or December 7
3760 Kilroy Airport Way, Suite 36 Long Beach, California 90806		18. Check only if applicable and		, vo. 10 pro	peny nelu in trust (	Decedent's Estate
Zong Douon, Camornia 70000		Debtor is a TRANSMITTING				
	Ì	Filed in connection with a M		ansaction -	- effective 30 years	
		Filed in connection with a Pi				
			Tarisac		auto do fedia	

FILING OFFICE COPY — NATIONAL UCC FINANCING STATEMENT ADDENDUM (FORM UCC1Ad) (REV. 07/29/98) NATUCCI - 5/4/01 C T System Online

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UCC FINANCING S FOLLOW INSTRUCTIONS	TATEMENT (front and back)	TADDITIONAL PARTY CAREFULLY	,			
		ON RELATED FINANCING ST	ATEMENT			
19a, ORGANIZATION'S N	AME		777217217			
OR WHHB1 Realty,	L.L.C.					
19b. INDIVIDUAL'S LAST	NAME	FIRST NAME	MIDDLE NAME, SUFFIX			
20. MISCELLANEOUS:						
	500	٥.	THE	ADOVE SPACES		
21. ADDITIONAL DEBTO 21a. ORGANIZATION'S N	R'S EXACT FUL	LLECAL NAME - insert only one r	name (21a or 21b) - do not abbreviate or com	bine names	IS FOR FILING OFFICE	USE ONLY
West Bay Manor	, L.L.C.					
216. INDIVIDUAL'S LAST	NAME		FIRST NAME	MIDDLE	NAME	SUFFIX
1c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	
5102 W. Laurel Stre	et, Suite 700	$O_{i}$	Tampa	FL	- I <sup>-</sup>	COUNTRY
td. SEEINSTRUCTIONS	ADD'L INFO RE ORGANIZATION	214. TYPE OF ORGANIZATION	JURISDICTION OF ORGANIZATION		33607 GANIZATIONAL ID #, if any	USA
	DEBTOR	limited liability co.	Delaware	i		ļī
2. ADDITIONAL DEBTO 22a. ORGANIZATION'S N.	R'S EXACT FUL	L LEGAL NAME - insert only one n	ame (22a y 22b) - do not abbreviate or com	bine names		NC
Integrated Living 22b. INDIVIDUAL'S LAST	g Communitie	es of Sarasota, L.L.C.	FIRST NAME	MIDDLE	NAME	SUFFIX
			CITY	STATE	POSTAL CODE	COUNTRY
5102 W. Laurel Stre			Tampa	FL	33607	USA
	ORGANIZATION DEBTOR	220. TYPE OF ORGANIZATION   limited liability co.	22f JURISDICTION OF ORGANIZATION Delaware	CVA	GANIZATIONAL ID #, if any	
3. ADDITIONAL DEBTOI 23a. ORGANIZATION'S NA	R'S EXACT FUL	L LEGAL NAME - insert only one n	ame (23a or 23b) - do not abbreviate or comb	semen enic		NOI
Integrated Manag	gement - Carr	ington Pointe, L.L.C.		(	), (	
23b. INDIVIDUAL'S LAST I	NAME		FIRST NAME	MIDDLE	NAM	SUFFIX
			, i		//:	
3c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY
102 W. Laurel Streets SEEINSTRUCTIONS			Tampa	FL	33607	USA
a SECIOSIROCIONS	ORGANIZATION	23e. TYPE OF ORGANIZATION	23f. JURISDICTION OF ORGANIZATION		GANIZATIONAL ID #, if any	CD/I
ADDITIONAL OFFICIAL	DEBTOR	limited liability co.	Delaware			Non
24a. ORGANIZATION'S NA	ED PARTY'S N	AME (or Name of TOTAL ASSIGNEE	) - insert only <u>one</u> name (24a or 24b)			
HCP HB2 Manor	- Pointe New	vport Place, LLC			· · · · · · · · · · · · · · · · · · ·	
1275. INDIVIDUAL 3 CAST II	MAME		FIRST NAME	MIODLE	NAME	SUFFIX
c. MAILING ADDRESS						1
760 Kilroy Airport	Way Suite 20	<b>λ</b> Λ :	CITY	STATE	POSTAL CODE	COUNTRY
			Long Beach	CA	90806	USA
ON OF INDAMENTAL	IAIC	AME (or Name of TOTAL ASSIGNEE	- insert only <u>one</u> name (25a or 25b)			
HCP HB2 Pinecre	est Place, LLO					
			FIRST NAME	MIDDLE	IAME	SUFFIX
c. MAILING ADDRESS	<u> </u>	<del></del>	CITY			
760 Kilroy Airport V	Way, Suite 30	0	Long Beach	STATE	POSTAL CODE	COUNTRY
	,		Toug Deacil	CA	90806	USA

FILING OFFICE COPY -- UCC FINANCING STATEMENT ADDITIONAL PARTY (FORM UCC1AP) (REV. 05/22/02)

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UCC FINANCING STATEMENT ADDITIONAL PARTY

FOLLOW INSTRU	JCTIONS (front and back) (	CAREFULLY	' <u> </u>			
19. NAME OF FIR	IST DEBTOR (1a or 1b) C	ON RELATED FINANCING S	TATEMENT			
19a. ORGANIZ	ATION'S NAME				÷	
OR WHHB1	Realty, L.L.C.					
19b. INDIVIDUA	L'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX			
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20. MISCELLANE	ous:					
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	<i>/</i> -					
	´O <sub>4</sub>		Ì			
	000					
	C	) /h				
21. ADDITIONAL	DEBTOR'S EXACT FULL	LEGA' NAME insert only one	name (21a or 21b) - do not abbreviate	THE ABOVE SPA	CE IS FOR FILING O	FICE USE ONLY
<u> </u>		The same of the sa	Harrier (214 of 210) - do not appreviate	e or combine names	*	
South Bay	Manor, L.L.C.	$O_{x}$				
21b. INDIVIDUA	L'S LAST NAME		FIRST NAME	MIDI	OLE NAME	SUFFIX
				:		
21c. MAILING ADDR			CITY	STA	TE POSTAL CODE	COUNTRY
21d SEEINSTRUCT	rel Street, Suite 700	21. TYPE OF ORGANIZATION	15.mpa	FL	33607	USA
	ORGANIZATION		EIT JURISDICTION OF ORGANIZ	ATION 21g.	ORGANIZATIONAL ID #,	if any
22. ADDITIONAL	DEBTOR'S EVACT FULL	limited liability co.	Delar vare		<u> </u>	Non
22a. ORGANIZA	TION'S NAME	LEGAL NAME - insert only one	name (22a or zzh) - du not abbreviate	or combine names		
Senior Lif	estyle Prosperity Lim	ited Partnership	4			
OR 22b. INDIVIDUA	estyle Prosperity Lim	acca i grunership	JFIRST NAME	IMIDE	DLE NAME	
				MIDE	CE NAME	SUFFIX
22c. MAILING ADDR			CITY	STAT	E POSTAL CODE	COUNTRY
5102 W. Laur	el Street, Suite 700		Tampa	FI	1	· · · · · ·
22d. SEEINSTRUCT	ORGANIZATION	2e. TYPE OF ORGANIZATION	221. JURISDICTION OF ORGANIZA		ORGANIZATIONAL ID #,	USA if any
22 40077	DEBTOR	limited partnership	Delaware			None
23. ADDITIONAL I	DEBTOR'S EXACT FULL TION'S NAME	LEGAL NAME - insert only one	name (23a or 23b) - do not abbreviate	or combine names	.0.	INON
1		and Dames and				·····
OR 23b. INDIVIDUA	estyle Pinecrest Limit	ed Parmership	FIRST NAME		<u> </u>	
			The state of the s	MIDE	LENAME	SUFFIX
23c. MAILING ADDRE	SS		CITY	CTO		)
5102 W. Laur	el Street, Suite 700		Tampa	STAT		COUNTRY
23d. SEEINSTRUCTI		Se. TYPE OF ORGANIZATION	23f. JURISDICTION OF ORGANIZA	FL ATION 23g. (	33607 ORGANIZATIONAL ID #, I	USA
	DEBTOR	limited partnership	ı Delaware	,	The state of the s	
24. ADDITIONAL S 24a. ORGANIZA	ECURED PARTY'S NA	ME (or Name of TOTAL ASSIGNE	E) - insert only <u>one</u> name (24a or 24b)	)	-	NONE
	HONE STATE					
OR 24b, INDIVIDUAL	South Bay Manor, LI	LC				
	The state of the s		FIRST NAME	MIDDI	E NAME	SUFFIX
24c. MAILING ADDRE	SS		CiTY			
3760 Kilroy A	irport Way, Suite 300	)	Long Beach	STATE		COUNTRY
25. ADDITIONAL S	ECURED PARTY'S NAM		:) - insert only <u>one</u> name (25a or 25b)	CA	90806	USA
		( NEED OF POTAL ASSIGNED	;) - msert only <u>one</u> name (25a or 25b)			
HCP HB2	Herons Run, LLC					
256. INDIVIDUAL	S LAST NAME		FIRST NAME	MIDDL	E NAME	SUFFIX
25c. MAILING ADDRE	86					1
	ss irport Way, Suite 300	<del></del>	CITY	STATE		COUNTRY
- so temoj A	aport way, suite 300	**************************************	Long Beach	CA	90806	USA

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# **UNOFFICIAL COPY**

UCC FINANCING STATEMENT ADDITIONAL PARTY

	UEB   UR (1a or 1h	ON RELATED BILLIAND	CTATELON			
19a. ORGANIZATIO	N'S NAME	O) ON RELATED FINANCING	STATEMENT			
WHHB1 Rea	aity, L.L.C.					
19b. INDIVIDUAL'S	LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX			
0. MISCELLANEOU:	S:					
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	70			•		
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ADDITIONAL DE	STOP'S EVACE EL			THE ABOVE SP	ACE IS FOR FILING	OFFICE USE ONL
21a. ORGANIZATIO	N'S NAME	LL L' GF L NAME - insert only	one name (21a or 21b) - do not abbreviate	ar combine names		THE COL ONE
					· · · · · · · · · · · · · · · · · · ·	
21b. INDIVIDUAL'S	ds Senior Housi	ing, L.L.C.	FIRST NAME			
			, MOTHAME	MIC	DLE NAME	SUFFIX
c. MAILING ADDRESS			crity			
102 W. Laurel S	Street, Suite 700		Fumna	STA		COUNT
d. SEEINSTRUCTIONS	ADD'L INFO RE ORGANIZATION	21e, TYPE OF ORGANIZATION	21' JURISDICTION OF ORGANIZA	TION 210	33607 . ORGANIZATIONAL ID	USA
	DEBTOR	limited liability co	(Dala was	J= ·•	ONGANIZATIONAL ID	f, if any
22a ORGANIZATION	TOR'S EXACT FUL	L LEGAL NAME - insert only g	ne name (22a or 22) /- di not abbreviate d	Or combine name		
				annouse Hallings		
22b. INDIVIDUAL'S L	AST NAME	mited Partnership	Y			
			FIRST NAME	MiDi	DLE NAME	SUFFIX
MAILING ADDRESS						
MAILING ADDRESS						1
02 W. Laurel S	treet. Suite 700		СПУ	STA	TE POSTAL CODE	COUNTR
102 W. Laurel S	ADD'L INFO RE	22e. TYPE OF ORGANIZATION	Tampa	FL	33607	APIT
02 W. Laurel S	ADD'L INFO RE ORGANIZATION DEBTOR	220 TYPE OF ORGANIZATION	Tampa  221. JURISDICTION OF ORGANIZAT	FI TON		APIT
02 W. Laurel S	ADD'L INFO RE ORGANIZATION DEBTOR	limited nartnership	Tampa  221. JURISDICTION OF ORGANIZAT	FI TON	33607	USA if any
02 W. Laurel S SEEINSTRUCTIONS ADDITIONAL DEB 23a. ORGANIZATION	ADD'L INFO RE ORGANIZATION DEBTOR TOR'S EXACT FULI S NAME	limited partnership L LEGAL NAME - insert only or	Tampa   22: JURISDICTION OF ORGANIZAT   Delaware   name (23e or 23b) - do not abbreviate or	FI TON	33607	USA if any
02 W. Laurel S SEEINSTRUCTIONS ADDITIONAL DEB 23a. ORGANIZATION	ADD'L INFO RE ORGANIZATION DEBTOR TOR'S EXACT FULI S NAME	limited partnership L LEGAL NAME - insert only or	Tampa   22: JURISDICTION OF ORGANIZAT   Delaware   name (23e or 23b) - do not abbreviate or	FI TON	33607	USA if any
02 W. Laurel S SEEINSTRUCTIONS ADDITIONAL DEB 23a. ORGANIZATION	ADD'L INFO RE ORGANIZATION DEBTOR TOR'S EXACT FULI S NAME	limited nartnership	Tampa   22: JURISDICTION OF ORGANIZAT   Delaware   name (23e or 23b) - do not abbreviate or	FI 29 Combine names	33607	USA if any
O2 W. Laurel S SEEINSTRUCTIONS ADDITIONAL DEB 23a. ORGANIZATION Integrated Live 23b. INDIVIDUAL'S LA	ADD'L INFO RE ORGANIZATION DEBTOR TOR'S EXACT FULI S NAME	limited partnership L LEGAL NAME - insert only or	Tampa   22r. JURISDICTION OF ORGANIZAT   Delaware   Delaware (23a or 23b) - do not abbreviate or	FI 29 Combine names	33607 ORGANIZATIONAL ID #	USA if any
ADDITIONAL DEB 23a, ORGANIZATION Integrated Live 23b, INDIVIDUAL'S LA	ADD'L INFO RE ORGANIZATION DEBTOR TOR'S EXACT FULI S NAME ing Communitie	limited partnership L LEGAL NAME - insert only or	Tampa   22f. JURISDICTION OF ORGANIZAT   Delaware   Delaware   name (23e or 23b) - do not abbreviate or   L.L.C.   FIRST NAME   CITY	FI 29 Combine names	33607 ORGANIZATIONAL ID #	USA if any
O2 W. Laurel S SEEINSTRUCTIONS ADDITIONAL DEB 23a. ORGANIZATION Integrated Live 23b. INDIVIDUAL'S LA	ADD'L INFO RE ORGANIZATION DEBTOR TOR'S EXACT FULI S NAME ing Communitie ST NAME treet, Suite 700 ADD'L INFO RE	LLEGAL NAME insert only or s of West Palm Beach	Tampa   22f. JURISDICTION OF ORGANIZAT   Delaware   Delaware   name (23e or 23b) - do not abbreviate or   L.L.C.   FIRST NAME   CITY   Tampa	Combine names  MIDD  STAT	33607 ORGANIZATIONAL ID #	USA if any Suffix COUNTRY
ADDITIONAL DEB 23a. ORGANIZATION Integrated Liv. 23b. INDIVIDUAL'S LA MAILING ADDRESS 02 W. Laurel St SEEINSTRUCTIONS	ADDL INFO RE ORGANIZATION DEBTOR TOR'S EXACT FULI S NAME ing Communitie ST NAME treet, Suite 700 ADDL INFO RE ORGANIZATION DEBTOR	L LEGAL NAME - insert only or is of West Palm Beach	Tampa    22: JURISDICTION OF ORGANIZAT   Delaware   Delaware   name (23e or 23b) - do not abbreviate or   L.L.C.   FIRST NAME    CITY   Tampa   236 JURISDICTION OF ORGANIZATI	FI TON 70. Combine names MIDD	33607 ORGANIZATIONAL ID #	USA if any SUFFIX COUNTRY
ADDITIONAL DEB 23a. ORGANIZATION Integrated Liv. 23b. INDIVIDUAL'S LA MAILING ADDRESS 02 W. Laurel St SEEINSTRUCTIONS	ADDL INFO RE ORGANIZATION DEBTOR TOR'S EXACT FULI S NAME ing Communitie ST NAME treet, Suite 700 ADDL INFO RE ORGANIZATION DEBTOR	L LEGAL NAME - insert only or is of West Palm Beach	Tampa    22: JURISDICTION OF ORGANIZAT   Delaware   Delaware   name (23e or 23b) - do not abbreviate or   L.L.C.   FIRST NAME    CITY   Tampa   236 JURISDICTION OF ORGANIZATI	FI TON 70. Combine names MIDD	J33607 ORGANIZATIONAL ID #	SUFFIX COUNTRY USA
ADDITIONAL DEB 23a, ORGANIZATION Integrated Living ADDRESS 02 W. Laurel St SEEINSTRUCTIONS ADDITIONAL SECU	ADD'L INFO RE ORGANIZATION DEBTOR TOR'S EXACT FULI S NAME ing Communitie ST NAME  Treet, Suite 700  ADD'L INFO RE ORGANIZATION DEBTOR  JRED PARTY'S NAME	LIMITED PARTNERShip L LEGAL NAME - insert only or s of West Palm Beach 23e. TYPE OF ORGANIZATION Limited liability co. AME (or Name of TOTAL ASSIGN	Tampa    22f. JURISDICTION OF ORGANIZAT   Delaware    Delaware   name (23e or 23b) - do not abbreviate or   L.L.C.   FIRST NAME    CITY   Tampa	FI TON 70. Combine names MIDD	J33607 ORGANIZATIONAL ID #	SUFFIX COUNTRY USA
ADDITIONAL DEB  23a. ORGANIZATION  Integrated Living ADDITIONAL SEA  MAILING ADDRESS  02 W. Laurel St  SEEINSTRUCTIONS  ADDITIONAL SECU  24a. ORGANIZATIONS  HCP HB2 Park	ADD'L INFO RE ORGANIZATION DEBTOR TOR'S EXACT FULI SNAME ing Communitie Ing	LIMITED PARTNERShip L LEGAL NAME - insert only or s of West Palm Beach 23e. TYPE OF ORGANIZATION Limited liability co. AME (or Name of TOTAL ASSIGN	Tampa    22: JURISDICTION OF ORGANIZAT   Delaware   Delaware   name (23e or 23b) - do not abbreviate or   L.L.C.   FIRST NAME    CITY   Tampa   236 JURISDICTION OF ORGANIZATI	FI TON 70. Combine names MIDD	J33607 ORGANIZATIONAL ID #	SUFFIX COUNTRY USA
ADDITIONAL DEB 23a, ORGANIZATION Integrated Living ADDRESS 02 W. Laurel St SEEINSTRUCTIONS ADDITIONAL SECU	ADD'L INFO RE ORGANIZATION DEBTOR TOR'S EXACT FULI SNAME ing Communitie Ing	LIMITED PARTNERShip L LEGAL NAME - insert only or s of West Palm Beach 23e. TYPE OF ORGANIZATION Limited liability co. AME (or Name of TOTAL ASSIGN	Tampa    22: JURISDICTION OF ORGANIZAT   Delaware   Delaware   name (23e or 23b) - do not abbreviate or   L.L.C.   FIRST NAME    CITY   Tampa   236 JURISDICTION OF ORGANIZATI	FIL TON 20 STAT FL ON 23g, 0	J33607 ORGANIZATIONAL ID #	SUFFIX COUNTRY USA
ADDITIONAL DEB 23a, ORGANIZATION Integrated Liv 23b, INDIVIDUAL'S LA MAILING ADDRESS 02 W. Laurel St SEEINSTRUCTIONS ADDITIONAL SECU 24a, ORGANIZATION HCP HB2 Park 24b, INDIVIDUAL'S LAS	ADD'L INFO RE ORGANIZATION DEBTOR TOR'S EXACT FULI SNAME ing Communitie Ing	LIMITED PARTNERShip L LEGAL NAME - insert only or s of West Palm Beach 23e. TYPE OF ORGANIZATION Limited liability co. AME (or Name of TOTAL ASSIGN	Tampa    22f. JURISDICTION OF ORGANIZAT   Delaware   Delaware   A.L.C.   FIRST NAME    CITY   Tampa   23f. JURISDICTION OF ORGANIZATI   Delaware   Delaware   EED - insert only one name (24s or 24b)	FIL TON 20 STAT FL ON 23g, 0	J33607 ORGANIZATIONAL ID #	SUFFIX COUNTRY USA
ADDITIONAL DEB 23a, ORGANIZATION Integrated Liv. 23b. INDIVIDUAL'S LA MAILING ADDRESS 02 W. Laurel St SEEINSTRUCTIONS ADDITIONAL SECU 24a, ORGANIZATION'S HCP HB2 Park 24b. INDIVIDUAL'S LAS	ADD'L INFO RE ORGANIZATION DEBTOR  TOR'S EXACT FULL S NAME  ing Communitie ST NAME  Treet, Suite 700  ADD'L INFO RE ORGANIZATION DEBTOR  JRED PARTY'S NAME  TAME  TAME  AT Vernon Hills ST NAME	LIMITED PARTNERShip LLEGAL NAME - insert only or s of West Palm Beach 23e. TYPE OF ORGANIZATION Limited liability co. AME (or Name of TOTAL ASSIGN	Tampa    22: JURISDICTION OF ORGANIZAT   Delaware   Iname (23e or 23b) - do not abbreviate or   L.L.C.   FIRST NAME    CITY   Tampa   23f. JURISDICTION OF ORGANIZATI   Delaware   (24e or 24b)     FIRST NAME   (24e or 24b)	FIL TON 20 STAT FL ON 23g, 0	J33607 ORGANIZATIONAL ID #.  LE NAME  POSTAL CODE  33607  DRGANIZATIONAL ID #.	SUFFIX  SUFFIX
ADDITIONAL DEB  23a. ORGANIZATION  Integrated Living ADDRESS  02 W. Laurel St  SEEINSTRUCTIONS  ADDITIONAL SECU- 24a. ORGANIZATION'S  HCP HB2 Park 24b. INDIVIDUAL'S LAS  MAILING ADDRESS  00 Kilroy Airpoi	ADD'L INFO RE ORGANIZATION DEBTOR TOR'S EXACT FULL S NAME ing Communitie st NAME treet, Suite 700 ADD'L INFO RE ORGANIZATION DEBTOR JRED PARTY'S NA E at Vernon Hills ST NAME at Vernon Hills TNAME	LIMITED PARTNERShip LLEGAL NAME - insert only or s of West Palm Beach 23e. TYPE OF ORGANIZATION limited liability co. AME (or Name of TOTAL ASSIGN to, LLC	Tampa    22f. JURISDICTION OF ORGANIZAT   Delaware   Delaware   name (23s or 23b) - do not abbreviste or   L.L.C.   FIRST NAME    CITY   Tampa   23f. JURISDICTION OF ORGANIZATI   Delaware    Delaware   EED - insert only one name (24s or 24b)    FIRST NAME	MIDDI STATE  MIDDI STATE  MIDDI STATE  MIDDI STATE	DRGANIZATIONAL ID #	SUFFIX  COUNTRY  SUFFIX  COUNTRY
ADDITIONAL DEB  23a. ORGANIZATION  Integrated Living ADDRESS  02 W. Laurel St  SEEINSTRUCTIONS  ADDITIONAL SECU- 24a. ORGANIZATION'S  HCP HB2 Park 24b. INDIVIDUAL'S LAS  MAILING ADDRESS  00 Kilroy Airpoi	ADD'L INFO RE ORGANIZATION DEBTOR TOR'S EXACT FULL S NAME ing Communitie st NAME treet, Suite 700 ADD'L INFO RE ORGANIZATION DEBTOR JRED PARTY'S NA E at Vernon Hills ST NAME at Vernon Hills TNAME	LIMITED PARTNERShip LLEGAL NAME - insert only or s of West Palm Beach 23e. TYPE OF ORGANIZATION limited liability co. AME (or Name of TOTAL ASSIGN to, LLC	Tampa    22: JURISDICTION OF ORGANIZAT   Delaware   Iname (23e or 23b) - do not abbreviate or   L.L.C.   FIRST NAME    CITY   Tampa   23f. JURISDICTION OF ORGANIZATI   Delaware   (24e or 24b)     FIRST NAME   (24e or 24b)	Combine names  MIDD  STAT  FL  ON   23g. 6	J33607 ORGANIZATIONAL ID #.  LE NAME  POSTAL CODE  33607  DRGANIZATIONAL ID #.	SUFFIX  SUFFIX
ADDITIONAL DEB 23a. ORGANIZATION Integrated Live 23b. INDIVIDUAL'S LA MAILING ADDRESS 02 W. Laurel St SEEINSTRUCTIONS ADDITIONAL SECU 24a. ORGANIZATION HCP HB2 Park 24b. INDIVIDUAL'S LAS MAILING ADDRESS 60 Kilroy Airpon DDITIONAL SECU 25a. ORGANIZATION'S	ADD'L INFO RE ORGANIZATION DEBTOR TOR'S EXACT FULI SNAME  INGE COMMUNITIE ST NAME  ADD'L INFO RE ORGANIZATION DEBTOR  IRED PARTY'S NA INAME  AT Vernon Hills ST NAME  AT Vernon Hills ST NAME  AT Vernon Hills ST NAME  AT Way, Suite 30 RED PARTY'S NA NAME	LIMITED PARTNERShip LLEGAL NAME - insert only or LLEGAL NAME - insert only or S of West Palm Beach 23e. TYPE OF ORGANIZATION Limited liability co. AME (or Name of TOTAL ASSIGN BLC  ME (or Name of TOTAL ASSIGN)	Tampa    22f. JURISDICTION OF ORGANIZAT   Delaware   Delaware   name (23s or 23b) - do not abbreviste or   L.L.C.   FIRST NAME    CITY   Tampa   23f. JURISDICTION OF ORGANIZATI   Delaware    Delaware   EED - insert only one name (24s or 24b)    FIRST NAME	MIDDI STATE  MIDDI STATE  MIDDI STATE  MIDDI STATE	DRGANIZATIONAL ID #	SUFFIX USA  SUFFIX  COUNTRY  SUFFIX  COUNTRY
ADDITIONAL DEB 23a. ORGANIZATION Integrated Live 23b. INDIVIDUAL'S LA MAILING ADDRESS 02 W. Laurel St SEEINSTRUCTIONS ADDITIONAL SECU 24a. ORGANIZATION HCP HB2 Park 24b. INDIVIDUAL'S LAS MAILING ADDRESS 60 Kilroy Airpon DDITIONAL SECU 25a. ORGANIZATION'S	ADD'L INFO RE ORGANIZATION DEBTOR TOR'S EXACT FULL S NAME ing Communitie st NAME treet, Suite 700 ADD'L INFO RE ORGANIZATION DEBTOR JRED PARTY'S NA E at Vernon Hills ST NAME at Vernon Hills TNAME	LIMITED PARTNERShip LLEGAL NAME - insert only or LLEGAL NAME - insert only or S of West Palm Beach 23e. TYPE OF ORGANIZATION Limited liability co. AME (or Name of TOTAL ASSIGN BLC  ME (or Name of TOTAL ASSIGN)	Tampa    22f. JURISDICTION OF ORGANIZAT   Delaware   Delaware   name (23e or 23b) - do not abbreviate or   L.L.C.   FIRST NAME    CITY   Tampa   23f. JURISDICTION OF ORGANIZATI   Delaware   Delaware   EED - insert only one name (24e or 24b)    FIRST NAME   CITY   Long Beach   EED - insert only one name (25e or 25b)	MIDDI STATE  MIDDI STATE  MIDDI STATE  MIDDI STATE	DRGANIZATIONAL ID #	SUFFIX  COUNTRY  SUFFIX  COUNTRY
ADDITIONAL DEB  23a. ORGANIZATION  Integrated Liv 23b. INDIVIDUAL'S LA  MAILING ADDRESS  02 W. Laurel St SEEINSTRUCTIONS  ADDITIONAL SECU 24a. ORGANIZATION'S  HCP HB2 Park 24b. INDIVIDUAL'S LAS  MAILING ADDRESS  60 Kilroy Airpon  ADDITIONAL SECU 25a. ORGANIZATION'S  HCP HB3 Sprin  15b. INDIVIDUAL'S LAS	ADD'L INFO RE ORGANIZATION DEBTOR TOR'S EXACT FULI SNAME  INGE COMMUNITIE ST NAME  ADD'L INFO RE ORGANIZATION DEBTOR  IRED PARTY'S NA INAME  AT Vernon Hills ST NAME  AT Vernon Hills ST NAME  AT Vernon Hills ST NAME  AT Way, Suite 30 RED PARTY'S NA NAME	LIMITED PARTNERShip LLEGAL NAME - insert only or LLEGAL NAME - insert only or S of West Palm Beach 23e. TYPE OF ORGANIZATION Limited liability co. AME (or Name of TOTAL ASSIGN BLC  ME (or Name of TOTAL ASSIGN)	Tampa    22f. JURISDICTION OF ORGANIZAT   Delaware   Delaware   name (23s or 23b) - do not abbreviste or   L.L.C.   FIRST NAME    CITY   Tampa   23f. JURISDICTION OF ORGANIZATI   Delaware    Delaware   EED - insert only one name (24s or 24b)    FIRST NAME	MIDDI STAT FL ON 239. 0  MIDDI STATE CA	DRGANIZATIONAL ID #	SUFFIX  COUNTRY  SUFFIX  COUNTRY
ADDITIONAL DEB  23a, ORGANIZATION  Integrated Liv. 23b, INDIVIDUAL'S LA  MAILING ADDRESS  02 W. Laurel St  SEEINSTRUCTIONS  ADDITIONAL SECU. 24a, ORGANIZATION'S  HCP HB2 Park 24b, INDIVIDUAL'S LAS  MAILING ADDRESS  60 Kilroy Airpoi ADDITIONAL SECU. 25a, ORGANIZATION'S  HCP HB3 Sprin 25b, INDIVIDUAL'S LAS  MAILING ADDRESS	ADD'L INFO RE ORGANIZATION DEBTOR TOR'S EXACT FULI S NAME  TOR'S NAME  TOR'S EXACT FULI S NAME	LIMITED PARTNERShip LLEGAL NAME - insert only or s of West Palm Beach 23e. TYPE OF ORGANIZATION limited liability co. AME (or Name of TOTAL ASSIGN E, LLC  ME (or Name of TOTAL ASSIGN) Ee, LLC	Tampa    22f. JURISDICTION OF ORGANIZAT   Delaware   Delaware   name (23e or 23b) - do not abbreviate or   L.L.C.   FIRST NAME    CITY   Tampa   23f. JURISDICTION OF ORGANIZATI   Delaware   Delaware   EED - insert only one name (24e or 24b)    FIRST NAME   CITY   Long Beach   EED - insert only one name (25e or 25b)	MIDDI STAT FL ON 239. 0  MIDDI STATE CA	J33607 ORGANIZATIONAL ID #  LE NAME  POSTAL CODE  33607 DRGANIZATIONAL ID #  E NAME  POSTAL CODE  90806	SUFFIX COUNTRY USA SUFFIX COUNTRY USA

UCC FINANCING STATEMENT ADDITIONAL PARTY (FORM UCC1AP) (REV. 05/22/02)

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FOLLOW INSTRUCTION	SIAIEMEN* S (front and back	T <b>ADDITIONAL PART</b> CAREFULLY	Υ				
		ON RELATED FINANCING S	TATEMENT				
198, ORGANIZATION'S	NAME		7.11.0[10]				
OR WHHB1 Realty	, L.L.C.						
19B, INDIVIDUAL'S LASI	I NAME	FIRST NAME	MIDDLE NAME, SUFFIX				
20. MISCELLANEOUS:							
	DR'S EXACT FILE	Sa					
21. ADDITIONAL DEBTO		LIFGA NUME investors	name (21a or 21b) - do not abbrevist	THE ABOVE	E SPACE	IS FOR FILING OFFICE	USE ONLY
	., ., ., .		name (21a or 21b) - do not abbreviat	e or combine nam	es		
OR 21b. INDIVIDUAL'S LAST	Heritage, L.L	C.					
216. INDIVIDUAL'S LAST	NAME		FIRST NAME		MIDDLE	NAME	SUFFIX
21c, MAILING ADDRESS	<del></del>		2TY				
5102 W. Laurel Stre	eet, Suite 700		C mpa		STATE	POSTAL CODE	COUNTRY
21d. SEE INSTRUCTIONS		21e. TYPE OF ORGANIZATION	211 JURISPICTION OF ORGANIZ	ZATION	FL 21g. Of	33607 RGANIZATIONAL ID #, if any	USA
	DEBTOR	limited liability co.	Delayare		i	,,	Non
22a. ORGANIZATION'S	OR'S EXACT FUL NAME	L LEGAL NAME - insert only one	name (22a or 22b - dr net abbreviat	e or combine nam	es.		
Greenwich Bay,	L.L.C.		45.				
22b, INDIVIDUAL'S LAST	NAME		FIRST NAME		MIDDLE	NAME	SUFFIX
22c. MAILING ADDRESS			4				
5102 W. Laurel Stre	nat Cuita 700		СПУ	し	STATE	POSTAL CODE	COUNTRY
22d SEEINSTRUCTIONS	ADD'L INFO RE	22a. TYPE OF ORGANIZATION	Tampa 22f. JURISDICTION OF ORGANIZ	ATION C	FL	33607	USA
	ORGANIZATION DEBTOR	limited liability co.	l Delaware	•		GANIZATIONAL ID#, if any	
23. ADDITIONAL DEBTO	R'S EXACT FUL	L LEGAL NAME - insert only one	name (23a or 23b) - do not abbreviate	or combine name		<u></u>	NON
	<del></del>						
OR 23b. INDIVIDUAL'S LAST	NAME	Limited Partnership	FIRST NAME		Ti ko	<u> </u>	
					MIDDLE	NAME	SUFFIX
23c. MAILING ADDRESS	·	<del></del>	СПУ	<del></del>	STATE	POSTAL CODE	COUNTRY
5102 W. Laurel Stre		a. 8.0	Tampa		FL	33607	USA
	ORGANIZATION DESTOR	23e. TYPE OF ORGANIZATION limited partnership	23f. JURISDICTION OF ORGANIZ	ATION	23g. OR	GANIZATIONAL ID #, if any	100
24. ADDITIONAL SECUR		AME (or Name of TOTAL ASSIGNE	Delaware  E) - insert only <u>one</u> name (24a or 24b	,	L		NONE
E-MI ONGAINEATION SIN	∧ME		L) - maert only <u>one</u> name (24a or 24b	»)			,
OR HCP HB3 Willow	wbrook, LLC					•	
a to mornoone o engi	NAME		FIRST NAME		MIDDLE	NAME	SUFFIX
24c. MAILING ADDRESS			CITY		STATE	Ingertal cons	
3760 Kilroy Airport			Long Beach		CA	POSTAL CODE 90806	COUNTRY
25. ADDITIONAL SECUR 25a. ORGANIZATION'S NA	ED PARTY'S N	AME (or Name of TOTAL ASSIGNE	E) - insert only one name (25a or 25b)	)	OI L	70000	USA
Merine Cijon Sign	- MARIE						··
HCP HB3 First C	NAME		FIRST NAME		MIDOLG	(A)(C	
					MIDÖLE	MAME	SUFFIX
3760 Kilroy Aimort	Way Carre an		слу		STATE	POSTAL CODE	COUNTRY
3760 Kilroy Airport	way, Suite 30	TU .	Long Beach		CA	90806	USA

FILING OFFICE COPY — UCC FINANCING STATEMENT ADDITIONAL PARTY (FORM UCC1AP) (REV. 05/22/02)

0701918072 Page: 7 of 19

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JCC FINANCING S FOLLOW INSTRUCTION:	STATEMENT S (front and back)	ADDITIONAL PARTY CAREFULLY	<b>′</b>				
19. NAME OF FIRST DE	BTOR (1a or 1b)	ON RELATED FINANCING ST	ATEMENT				
19a. ORGANIZATION'S	IAME						
WHHB1 Realty	, L.L.C.						
196. INDIVIDUAL'S LAST	NAME	FIRST NAME	MIDDLE NAME, SUFFIX				
0.MISCELLANEOUS:							
	000	94		THE ABOVE S	<b>SPACE</b>	IS FOR FILING OFFICE	RISE ONLY
1. ADDITIONAL DEBTO	R'S EXACT FUL	L LEGAL NAME - insert only one	name (21a or 21b) - do not abbreviate	or combine names	, AUE	IO FOR PIELES OF FICE	OSE ORLI
ZIE. ORGANIZATION'S	VAME						
Cherry Hills Clu 216, INDIVIDUAL'S LAST	ib, L.L.C.	Q <sub>c</sub>					
ZID. INDIVIDUAL'S LAST	NAME		FIRST NAME	ı	MIDDLE	NAME	SUFFIX
21c. MAILING ADDRESS			CITY		STATE	POSTAL CODE	COUNTRY
5102 W. Laurel Stre	et, Suite 700	<u> </u>	Tampa		FL	33607	USA
III. SEEINSTRUCTIONS	ADD'L INFO RE ORGANIZATION	21e. TYPE OF ORGANIZATION	121 IRISDICTION OF ORGANIZ	ATION 2	21g. OR	GANIZATIONAL ID #, if any	1
	DEBTOR	limited liability co.	Delaw_re	·			Пиом
22. ADDITIONAL DEBTO 22a. ORGANIZATION'S N	R'S EXACT FUL	L LEGAL NAME - insert only one	name (22a o. 22h) - do not abbreviate	or combine names			
ZZE. ORGANIZATION ST	AVME		0,				
Senior Lifestyle 226. INDIVIDUAL'S LAST	East Bay Lim	ited Partnership	<u> </u>				
220. HADIAIDONE S ENSI	NAME		FIRST NAME	)	MIDDLE	NAME	SUFFIX
2-1411114							
2c. MAILING ADDRESS		**	CITY		STATE	POSTAL CODE	COUNTRY
5102 W. Laurel Stre			Tampa		FL	33607	USA
2d. SEEINSTRUCTIONS	ORGANIZATION	22e. TYPE OF ORGANIZATION	22f. JURISDICTION OF ORGANIZ	ATION 2	2g. OR	GANIZATIONAL ID #, if any	
	DEBTOR	limited partnership	Delaware		2		Non
3. ADDITIONAL DEBTO 23a. ORGANIZATION'S N	R'S EXACT FUL	L LEGAL NAME - insert only one	name (23a or 23b) - do not abbreviate	or combine names			
1					(	S'	T- 1.1
OR 236 INDIVIDUAL'S LAST	Sakonnet Bay	Limited Partnership					
	. verience		FIRST NAME	N	MODLE		SUFFIX
3c. MAILING ADDRESS							1
5102 W. Laurel Stre			СПУ	s	TATE	POSTAL CODE	COUNTRY
3d. SEEINSTRUCTIONS		23e. TYPE OF ORGANIZATION	Tampa  23f. JURISDICTION OF ORGANIZA		FL	33607	USA
· · · · · · · · · · · · · · · · · · ·	ORGANIZATION	limited partnership	•	ATION 2	3g. OR	SANIZATIONAL ID#, if any	
A ADDITIONAL SECULE	DEBTOR		Delaware				NON
24a. ORGANIZATION'S N	AME	AME (of Name of TOTAL ASSIGNE	E) - insert only one name (24a or 24b	)			
HCP HB2 Green	weich - East W	/est Bay - Olympia Field	1. 110				
24b. INDIVIDUAL'S LAST	NAME	rest bay - Olympia Field	IS, LLC				
			T INOT I WILL	ľ	IDDLE .	NAME	SUFFIX
4c. MAILING ADDRESS	<del> </del>		CITY		YA	(Con-1)	
3760 Kilroy Airport	Way, Suite 36	าด	Long Beach	1	TATE	POSTAL CODE	COUNTRY
			E) - insert only <u>one</u> name (25a or 25b)	(	CA	90806	USA
25a. ORGANIZATION'S N	AME	WALL OF IVERTIE OF I UTAL ASSIGNE	⊏) - insert only <u>one</u> name (25a or 25b)	)			
HCP HB2 Carrin	gton-Cherry F	Hills IIC					
R HCP HB2 Carrin	NAME	******* LLV	FIRST NAME	TEAT	DDIE :	IA NAT	1
				MI	IDDLE N	AME	SUFFIX
MAILING ADDRESS	****		CITY	er	ATE	POSTAL CODE	001.1
760 Kilroy Airport	Way, Suite 30	00	Long Beach	1	A	90806	COUNTRY
		· · · · · · · · · · · · · · · · · · ·	4		-4.1	20000	USA

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UCC FINANCING STATEMENT ADDITIONAL PARTY

MANE OF SIGNE OF							
. NAME OF FIRST DE	BTOR (1a or 1b)	ON RELATED FINANCING S	TATEMENT				
19s. ORGANIZATION'S	VAME		711 - 211-				
WHHB1 Realty	, L.L.C.						
19b. INDIVIDUAL'S LAS	TNAME	FIRST NAME	MIDDLE NAME, SUFFIX				
.MISCELLANEOUS:							
4	000	S/2x		THE ABOVE	SPACE	IS FOR FILING OFFK	CE USE ONLY
21a. ORGANIZATION'S	JR S EXACT FUI	LL LLGA L NAME - insert only one	name (21a or 21b) - do not abbreviate or	combine name			
Niles Lifestyle I		ambin Ora					
21b. INDIVIDUAL'S LAST	NAME	ersnip	FIRST NAME				
			NO I NAME		MIDDLE	NAME	SUFFIX
MAILING ADDRESS	<u> </u>		lomy		STATE	POSTAL CODE	
02 W. Laurel Stre	eet, Suite 700		T:mpa		FL		COUNTRY
SEEINSTRUCTIONS	ADD'L INFO RE ORGANIZATION	21e. TYPE OF ORGANIZATION	11 JURISDICTION OF ORGANIZATION	ON		33607 GANIZATIONAL ID#, if ai	USA
	DEBTOR	limited parntership	Illine is				
ADDITIONAL DEBTO 22a. ORGANIZATION'S N	R'S EXACT FUL	L LEGAL NAME - insert only one	name (22a or 22r / - di not abbreviate or	combine names			NC
222. ORGANIZATION S	NAME						
22b. INDIVIDUAL'S LAST	NAME		4/				
			FIRST NAME		MIDDLE	NAME	SUFFIX
MAILING ADDRESS	<u>.</u>		4				SUFFIX
WAILING ADDRESS			FIRST NAME		MIDDLE :	POSTAL CODE	SUFFIX
	ADD'L INFO RE	22e. TYPE OF ORGANIZATION	спу	C/2	STATE	POSTAL CODE	COUNTRY
		220. TYPE OF ORGANIZATION	4	C/2	STATE		COUNTRY
SEEINSTRUCTIONS ADDITIONAL DEBTO	ADD'L INFO RE ORGANIZATION DEBTOR PR'S EXACT FUL	!	CITY  22: JURISDICTION OF ORGANIZATION	ON O	STATE	POSTAL CODE	COUNTRY
SEEINSTRUCTIONS ADDITIONAL DEBTO	ADD'L INFO RE ORGANIZATION DEBTOR PR'S EXACT FUL	!	спу	ON O	STATE	POSTAL CODE	COUNTRY
SEEINSTRUCTIONS  ADDITIONAL DEBTC 23a. ORGANIZATION'S N	ADD'L INFO RE ORGANIZATION DEBTOR OR'S EXACT FUL IAME	!	CITY  22: JURISDICTION OF ORGANIZATION	ON O	STATE	POSTAL CODE	COUNTRY
SEEINSTRUCTIONS ADDITIONAL DEBTO 23a, ORGANIZATION'S N	ADD'L INFO RE ORGANIZATION DEBTOR OR'S EXACT FUL IAME	!	CITY  22: JURISDICTION OF ORGANIZATION	ON Combine names	STATE	POSTAL CODE  SANIZATIONAL ID #, if an	COUNTRY
SEEINSTRUCTIONS  ADDITIONAL DEBTO 239. ORGANIZATION'S N 236. INDIVIDUAL'S LAST	ADD'L INFO RE ORGANIZATION DEBTOR OR'S EXACT FUL IAME	!	22f. JURISDICTION OF ORGANIZATION of CREANIZATION of CREANIZAT	ON Combine names	STATE	POSTAL CODE  SANIZATIONAL ID #, if an	COUNTRY
SEEINSTRUCTIONS  ADDITIONAL DEBTO 239. ORGANIZATION'S N 239. INDIVIDUAL'S LAST	ADD'L INFO RE ORGANIZATION DEBTOR OR'S EXACT FUL IAME	!	CITY  22f. JURISDICTION OF ORGANIZATION  name (23a or 23b) - do not abbreviate or o	ON Combine names	STATE	POSTAL CODE  SANIZATIONAL ID #, if an	COUNTRY
SEEINSTRUCTIONS  ADDITIONAL DEBTC 23a. ORGANIZATION'S N 23b. INDIVIDUAL'S LAST MAILING ADDRESS	ADD'L INFO RE ORGANIZATION DEBTOR R'S EXACT FUL IAME	!	22f. JURISDICTION OF ORGANIZATION of CREANIZATION of CREANIZAT	ON Combine names	STATE  229. ORG	POSTAL CODE  SANIZATIONAL ID #, if an	SUFFIX COUNTRY
SEEINSTRUCTIONS  ADDITIONAL DEBTO 23a. ORGANIZATION'S N 23b. INDIVIDUAL'S LAST MAILING ADDRESS SEEINSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR  PR'S EXACT FUL  AME  ADD'L INFO RE ORGANIZATION DEBTOR	L LEGAL NAME - insert only one	CITY  22f. JURISDICTION OF ORGANIZATIO  pame (23a or 23b) - do not abbreviate or of  FIRST NAME  CITY  23f. JURISDICTION OF ORGANIZATIO	ON COMBINE NAMES	STATE  229. ORG	POSTAL CODE  SANIZATIONAL ID #, if an	COUNTRY  SUFFIX  COUNTRY
SEEINSTRUCTIONS  ADDITIONAL DEBTC 23a. ORGANIZATION'S N 23b. INDIVIDUAL'S LAST MAILING ADDRESS SEEINSTRUCTIONS  ADDITIONAL SECUR	ADD'L INFO RE ORGANIZATION DEBTOR  NAME  ADD'L INFO RE ORGANIZATION DEBTOR  DEBTOR  ADD'L INFO RE ORGANIZATION DEBTOR  DEBTOR  ED PARTY'S N	L LEGAL NAME - insert only one	CITY  22f. JURISDICTION OF ORGANIZATIO  pame (23a or 23b) - do not abbreviate or of  FIRST NAME  CITY  23f. JURISDICTION OF ORGANIZATIO	ON COMBINE NAMES	STATE  229. ORG	POSTAL CODE  SANIZATIONAL ID #, if an	COUNTRY  SUFFIX  COUNTRY
SEEINSTRUCTIONS  ADDITIONAL DEBTO 23a. ORGANIZATION'S N 23b. INDIVIDUAL'S LAST  MAILING ADDRESS  SEEINSTRUCTIONS  ADDITIONAL SECUR 24a. ORGANIZATION'S N	ADD'L INFO RE ORGANIZATION DEBTOR  R'S EXACT FUL  AME  ADD'L INFO RE ORGANIZATION DEBTOR  ED PARTY'S N  AME	L LEGAL NAME - insert only one  23e. TYPE OF ORGANIZATION  AME (or Name of TOTAL ASSIGNE	CITY    22f. JURISDICTION OF ORGANIZATION   22f. JURISDICTION ORGANIZATION   22f. JURISDIC	ON COMBINE NAMES	STATE  229. ORG	POSTAL CODE  SANIZATIONAL ID #, if an	COUNTRY  y  SUFFIX  COUNTRY
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SEEINSTRUCTIONS  ADDITIONAL DEBTC 23a. ORGANIZATION'S N 23b. INDIVIDUAL'S LAST  MAILING ADDRESS  SEEINSTRUCTIONS  ADDITIONAL SECUR 24a. ORGANIZATION'S N HCP HB2 Herita 24b. INDIVIDUAL'S LAST	ADD'L INFO RE ORGANIZATION DEBTOR  R'S EXACT FUL  AME  ADD'L INFO RE ORGANIZATION DEBTOR  ED PARTY'S N  AME	L LEGAL NAME - insert only one  23e. TYPE OF ORGANIZATION  AME (or Name of TOTAL ASSIGNE	CITY  22f. JURISDICTION OF ORGANIZATION  page (23a or 23b) - do not abbreviate or of the company	DN Combine names	STATE  22g. ORC  MIDDLE N  STATE  23g. ORG	POSTAL CODE  SANIZATIONAL ID #, if an in a	SUFFIX COUNTRY
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SEEINSTRUCTIONS  ADDITIONAL DEBTO 23a. ORGANIZATION'S N 23b. INDIVIDUAL'S LAST  MAILING ADDRESS  SEEINSTRUCTIONS  ADDITIONAL SECUR 24a. ORGANIZATION'S N HCP HB2 Herita 24b. INDIVIDUAL'S LAST  MAILING ADDRESS  60 Kilroy Airport  ADDITIONAL SECUR	ADD'L INFO RE ORGANIZATION DEBTOR  NAME  ADD'L INFO RE ORGANIZATION DEBTOR  ED PARTY'S NAME  Way, Suite 30  ED PARTY'S NAME	L LEGAL NAME - insert only one  23e. TYPE OF ORGANIZATION  AME (or Name of TOTAL ASSIGNE)  LLC	CITY  22f. JURISDICTION OF ORGANIZATION  PRINT NAME  CITY  23f. JURISDICTION OF ORGANIZATION  E) - insert only one name (24a or 24b)  FIRST NAME  CITY  Long Beach	DN Combine names	STATE  229. ORC  MIDDLE N  STATE  239. ORG	POSTAL CODE  SANIZATIONAL ID #, if an in a	SUFFIX SUFFIX SUFFIX
SEEINSTRUCTIONS  ADDITIONAL DEBTO 23a. ORGANIZATION'S N 23b. INDIVIDUAL'S LAST  MAILING ADDRESS  SEEINSTRUCTIONS  ADDITIONAL SECUR 24a. ORGANIZATION'S N HCP HB2 Herita 24b. INDIVIDUAL'S LAST  MAILING ADDRESS 60 Kilroy Airport  DOITIONAL SECUR 25a. ORGANIZATION'S N  MAILING ADDRESS 60 KILROY AIRPORT	ADD'L INFO RE ORGANIZATION DEBTOR  ADD'L INFO RE ORGANIZATION DEBTOR  ED PARTY'S NAME  Way, Suite 30  ED PARTY'S NAME	L LEGAL NAME - insert only one  23e. TYPE OF ORGANIZATION  AME (or Name of TOTAL ASSIGNE  LLC  OO  AME (or Name of TOTAL ASSIGNE)	CITY  22f. JURISDICTION OF ORGANIZATION  page (23a or 23b) - do not abbreviate or of the company	DN Combine names	STATE  229. ORC  MIDDLE N  STATE  239. ORG	POSTAL CODE  SANIZATIONAL ID #, if an idea in the idea	SUFFIX  SUFFIX  COUNTRY  COUNTRY  COUNTRY
SEEINSTRUCTIONS  ADDITIONAL DEBTO 23a. ORGANIZATION'S N 23b. INDIVIDUAL'S LAST  MAILING ADDRESS  SEEINSTRUCTIONS  ADDITIONAL SECUR 24a. ORGANIZATION'S N HCP HB2 Herita 24b. INDIVIDUAL'S LAST  MAILING ADDRESS 60 Kilroy Airport  ADDITIONAL SECURI 25a. ORGANIZATION'S N 25a. ORGANIZATION'S	ADD'L INFO RE ORGANIZATION DEBTOR  ADD'L INFO RE ORGANIZATION DEBTOR  ED PARTY'S NAME  Way, Suite 30  ED PARTY'S NAME	L LEGAL NAME - insert only one  23e. TYPE OF ORGANIZATION  AME (or Name of TOTAL ASSIGNE  LLC  OO  AME (or Name of TOTAL ASSIGNE)	CITY  22f. JURISDICTION OF ORGANIZATION  PRINT NAME  CITY  23f. JURISDICTION OF ORGANIZATION  E) - insert only one name (24a or 24b)  FIRST NAME  CITY  Long Beach	DN Combine names	STATE  229. ORC  MIDDLE N  STATE  239. ORG	POSTAL CODE  SANIZATIONAL ID #, if an idea in the idea	COUNTRY  SUFFIX  COUNTRY  SUFFIX  COUNTRY
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ADDITIONAL DEBTO  23a. ORGANIZATION'S N  23b. INDIVIDUAL'S LAST  MAILING ADDRESS  SEEINSTRUCTIONS  ADDITIONAL SECUR  24a. ORGANIZATION'S N  HCP HB2 Herita  24b. INDIVIDUAL'S LAST  MAILING ADDRESS  60 Kilroy Airport  ADDITIONAL SECURI  ADDITIONAL SECURI  25a. ORGANIZATION'S N  HCP HB2 Prospe  25b. INDIVIDUAL'S LAST N	ADD'L INFO RE ORGANIZATION DEBTOR  ADD'L INFO RE ORGANIZATION DEBTOR  ED PARTY'S NAME  Way, Suite 30  ED PARTY'S NAME	23e. TYPE OF ORGANIZATION  AME (or Name of TOTAL ASSIGNE  LLC  OO  AME (or Name of TOTAL ASSIGNE)	CITY  22f. JURISDICTION OF ORGANIZATION  PIRST NAME  CITY  23f. JURISDICTION OF ORGANIZATION  PIRST NAME  CITY  Long Beach  - insert only one name (25a or 25b)  FIRST NAME	DN	STATE  229. ORG  MIDDLE N  STATE  239. ORG	POSTAL CODE  JAME  POSTAL CODE  ANIZATIONAL ID #, if any  AME  POSTAL CODE  90806	COUNTRY  SUFFIX  COUNTRY  SUFFIX  COUNTRY
23b. INDIVIDUAL'S LAST  MAILING ADDRESS  SEEINSTRUCTIONS  ADDITIONAL SECUR 24a. ORGANIZATION'S N  HCP HB2 Herita 24b. INDIVIDUAL'S LAST  MAILING ADDRESS  60 Kilroy Airport	ADD'L INFO RE ORGANIZATION DEBTOR  PR'S EXACT FUL  ADD'L INFO RE ORGANIZATION DEBTOR  DEBTOR  ED PARTY'S NAME  Way, Suite 30 ED PARTY'S NAME  Way, Suite 30 ED PARTY'S NAME  TITY Oaks, LL  NAME	236. TYPE OF ORGANIZATION  AME (or Name of TOTAL ASSIGNE)  LLC  OO  AME (or Name of TOTAL ASSIGNE)	CITY  22f. JURISDICTION OF ORGANIZATION  pame (23a or 23b) - do not abbreviate or of the control	DN Combine names	STATE  29. ORC  MIDDLE N  STATE  239. ORG	POSTAL CODE  JAME  POSTAL CODE  ANIZATIONAL ID #, if any  AME  POSTAL CODE  90806	SUFFIX  SUFFIX  COUNTRY  SUFFIX  COUNTRY  USA

FILING OFFICE COPY — UCC FINANCING STATEMENT ADDITIONAL PARTY (FORM UCC1AP) (REV. 05/22/02)

0701918072 Page: 9 of 19

# **UNOFFICIAL COPY**

UCC FINANCING STATEMENT ADDITIONAL PARTY

OLLOW INSTRUC			Chundha et	TEMENT				
9. NAME OF FIRS	T DEBTOR (1a or 1b	) ON RELATED	JEINANKING STA					
19a. ORGANIZAT	ON'S NAME			TOMEN)				
WHHB1 R	ealty, L.L.C.							
19b. INDIVIDUAL	S LAST NAME	FIRST NAM	E	MIDDLE NAME SUFFIX				
O. MISCELLANEO	is.							
	0/2							
1. ADDITIONAL D	BTOR'S EXACT FU	LLI GA' NAM	(E. :		THE ABOVE	SPACE	IS FOR FILING O	FFICE USE ONL
21a. ORGANIZATI	ON'S NAME	CL 1 2GP NAW	IC - insert only one na	me (21a or 21b) - do not abbrevia	ite or combine nam	es		
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216. INDIVIDUAL:	LAST NAME		$\Theta_{\mathcal{R}}$	FIRST NAME		100-		
						MIDDLE	NAME	SUFFIX
c. MAILING ADDRES	s	· · · · · · · · · · · · · · · · · · ·		СПУ		A-7.1-		
						STATE	POSTAL CODE	COUNT
d. SEEINSTRUCTIO	ADD'L INFO RE ORGANIZATION	21e. TYPE OF C	RGANIZATION	27 PARSDICTION OF ORGANI	ZATION	21a OB	GANIZATIONAL ID#	
	DESTOR	1	ĺ	$\tau$		-	GAMEATIONAL ID #	if any
. ADDITIONAL DE	BTOR'S EXACT FU	LL LEGAL NAM	E - insert only one nar	me (22a o 22b) - do not abbrevia		<u></u>		
22a. ORGANIZATI	ON'S NAME	-		TO THE O' LED) - GO HOL SEDIEVIS	te of combine name	35		
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( <del>  </del>				0,				
22b. INDIVIDUAL'S	LAST NAME		<u> </u>	FIRST NAME		MIDDLE	NAME	laveen
225. INDIVIDUAL'S				FIRST NAME	×,	MIDDLE	NAME	SUFFIX
225. INDIVIDUAL'S				FIRST NAME	×			
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c. MAILING ADDRES	S ADD'L INFO RE ORGANIZATION	22e. TYPE OF O			ZATION	STATE	POSTAL CODE	COUNTE
c. MAILING ADDRES	ADD'L INFO RE ORGANIZATION DEBTOR	1	RGANIZATION 2	CITY  221. JURISDICTION OF ORGANIZ	.0	STATE 22g. ORG		COUNTE
c. MAILING ADDRES	ADD'L INFO RE ORGANIZATION DEBTOR	1	RGANIZATION 2	CITY  221. JURISDICTION OF ORGANIZ	.0	STATE 22g. ORG	POSTAL CODE	COUNTE
c. MAILING ADDRES	ADD'L INFO RE ORGANIZATION DEBTOR	1	RGANIZATION 2	CITY C	.0	STATE 22g. ORG	POSTAL CODE	COUNTE
c. MAILING ADDRES  d. SEEINSTRUCTION  ADDITIONAL DE 23a. ORGANIZATIO	S ADD'L INFO RE ORGANIZATION DEBTOR BTOR'S EXACT FUL N'S NAME	1	RGANIZATION Z	CITY  221. JURISDICTION OF ORGANIZ  The (23a or 23b) - do not abbreviate	.0	STATE 22g. ORG	POSTAL CODE  SANIZATIONAL ID #,	COUNTE
c. MAILING ADDRES  d. SEE INSTRUCTION  ADDITIONAL DE	S ADD'L INFO RE ORGANIZATION DEBTOR BTOR'S EXACT FUL N'S NAME	1	RGANIZATION Z	CITY  221. JURISDICTION OF ORGANIZ	.0	STATE 22g. ORG	POSTAL CODE  SANIZATIONAL ID #,	COUNTE
c. MAILING ADDRES  d. SEEINSTRUCTION  ADDITIONAL DE	ADD'L INFO RE ORGANIZATION DEBTOR BTOR'S EXACT FUL N'S NAME	1	RGANIZATION Z  - insert only <u>one</u> nem	CITY  22f. JURISDICTION OF ORGANIZ  ne (23a or 23b) - do not abbreviate  IRST NAME	.0	STATE 22g. ORG	POSTAL CODE  SANIZATIONAL ID #,	COUNTR
c. MAILING ADDRES  d. SEE INSTRUCTION  ADDITIONAL DE  23a. ORGANIZATIO  23b. INDIVIDUAL'S	ADD'L INFO RE ORGANIZATION DEBTOR BTOR'S EXACT FUL N'S NAME	1	RGANIZATION Z  - insert only <u>one</u> nem	CITY  221. JURISDICTION OF ORGANIZ  The (23a or 23b) - do not abbreviate	.0	STATE , 22g. ORG	POSTAL CODE  SANIZATIONAL ID #,	COUNTR
226. INDIVIDUAL'S  1. SEEINSTRUCTION  ADDITIONAL DE 230. ORGANIZATIO  230. INDIVIDUAL'S  AMAILING ADDRESS	S ADD'L INFO RE ORGANIZATION DEBTOR BTOR'S EXACT FUL N'S NAME LAST NAME	L LEGAL NAME	RGANIZATION 2  E - insert only <u>one</u> nerr	CITY  22f. JURISDICTION OF ORGANIZ  The (23a or 23b) - do not abbreviate  FIRST NAME	or combine name	STATE  , 22g. ORG	POSTAL CODE  SANIZATIONAL ID #,  NAME  POSTAL CODE	COUNTR SUFFIX COUNTR
226. INDIVIDUAL'S  3. MAILING ADDRES  4. SEE INSTRUCTION  ADDITIONAL DE 230. ORGANIZATIO  230. INDIVIDUAL'S  230. MAILING ADDRESS	ADD'L INFO RE ORGANIZATION DEBTOR BTOR'S EXACT FUL N'S NAME  LAST NAME  ADD'L INFO RE ORGANIZATION	1	RGANIZATION 2  E - insert only <u>one</u> nerr	CITY  22f. JURISDICTION OF ORGANIZ  ne (23a or 23b) - do not abbreviate  IRST NAME	or combine name	STATE  , 22g. ORG	POSTAL CODE SANIZATIONAL ID #,	COUNTR SUFFIX COUNTR
226. INDIVIDUAL'S  SEEINSTRUCTION  ADDITIONAL DE 239. ORGANIZATIO  230. INDIVIDUAL'S  MAILING ADDRESS  SEEINSTRUCTION  ADDITIONAL SE	ADD'L INFO RE ORGANIZATION DEBTOR BTOR'S EXACT FUL N'S NAME  LAST NAME  ADD'L INFO RE ORGANIZATION DEBTOR CURED PARTY'S N	L LEGAL NAME	RGANIZATION 2  E - insert only <u>one</u> near	CITY  22f. JURISDICTION OF ORGANIZ  THE (23a or 23b) - do not abbreviate  FIRST NAME  CITY  3f. JURISDICTION OF ORGANIZ	e or combine name	STATE  , 22g. ORG	POSTAL CODE  SANIZATIONAL ID #,  NAME  POSTAL CODE	COUNTR SUFFIX COUNTR
226. INDIVIDUAL'S  SEEINSTRUCTION  ADDITIONAL DE 239. ORGANIZATIO  230. INDIVIDUAL'S  MAILING ADDRESS  SEEINSTRUCTION	ADD'L INFO RE ORGANIZATION DEBTOR BTOR'S EXACT FUL N'S NAME  LAST NAME  ADD'L INFO RE ORGANIZATION DEBTOR CURED PARTY'S N	L LEGAL NAME	RGANIZATION 2  E - insert only <u>one</u> near	CITY  22f. JURISDICTION OF ORGANIZ  The (23a or 23b) - do not abbreviate  FIRST NAME	e or combine name	STATE  , 22g. ORG	POSTAL CODE  SANIZATIONAL ID #,  NAME  POSTAL CODE	COUNTR SUFFIX COUNTR
c. MAILING ADDRESS d. SEEINSTRUCTION ADDITIONAL DE 23a. ORGANIZATIO ADDITIONAL SE SEEINSTRUCTION ADDITIONAL SE 24a. ORGANIZATIO HCP HB2 No	ADD'L INFO RE ORGANIZATION DEBTOR BTOR'S EXACT FUL N'S NAME  LAST NAME  ADD'L INFO RE ORGANIZATION DEBTOR  CURED PARTY'S N N'S NAME  Orth Bay Manor I	L LEGAL NAME  23e. TYPE OF OF	RGANIZATION 2  E - insert only <u>one</u> near	CITY  22f. JURISDICTION OF ORGANIZ  THE (23a or 23b) - do not abbreviate  FIRST NAME  CITY  3f. JURISDICTION OF ORGANIZ	e or combine name	STATE  , 22g. ORG	POSTAL CODE  SANIZATIONAL ID #,  NAME  POSTAL CODE	COUNTR SUFFIX COUNTR
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c. MAILING ADDRESS d. SEEINSTRUCTION ADDITIONAL DE 234. ORGANIZATIO ADDITIONAL SEEINSTRUCTION SEEINSTRUCTION ADDITIONAL SE 244. ORGANIZATIO HCP HB2 No 246. INDIVIDUAL'S	ADD'L INFO RE ORGANIZATION DEBTOR BTOR'S EXACT FUL N'S NAME  LAST NAME  ADD'L INFO RE ORGANIZATION DEBTOR  CURED PARTY'S N N'S NAME  Orth Bay Manor I	L LEGAL NAME  23e. TYPE OF OF	RGANIZATION 2  E - insert only one nem  F  C  RGANIZATION 2	22f. JURISDICTION OF ORGANIZ  THE (23a or 23b) - do not abbreviate  FIRST NAME  CITY  3f. JURISDICTION OF ORGANIZ  insert only gng name (24a or 24b)	ATION	STATE  , 22g. ORG	POSTAL CODE  SANIZATIONAL ID #,  NAME  POSTAL CODE  ANIZATIONAL ID #, if	COUNTR SUFFIX COUNTR
c. MAILING ADDRESS d. SEEINSTRUCTION ADDITIONAL DE 23a. ORGANIZATIO 23b. INDIVIDUAL'S . MAILING ADDRESS ADDITIONAL SE 24a. ORGANIZATIO HCP HB2 No 24b. INDIVIDUAL'S	ADD'L INFO RE ORGANIZATION DEBTOR BTOR'S EXACT FUL N'S NAME  LAST NAME  ADD'L INFO RE ORGANIZATION DEBTOR CURED PARTY'S N N'S NAME ORTH Bay Manor, I	23e. TYPE OF OF AME (or Name of	RGANIZATION 2  E - insert only one nem  F  RGANIZATION 2:  TOTAL ASSIGNEE) -	22f. JURISDICTION OF ORGANIZ  THE (23a or 23b) - do not abbreviate  FIRST NAME  CITY  3f. JURISDICTION OF ORGANIZ  insert only gng name (24a or 24b)	ATION	STATE  , 22g. ORG  MICDLE N  STATE  23g. ORG	POSTAL CODE  SANIZATIONAL ID #, III  POSTAL CODE  ANIZATIONAL ID #, III	COUNTR SUFFIX SUFFIX
c. MAILING ADDRESS d. SEEINSTRUCTION ADDITIONAL DE 23a. ORGANIZATIO 23b. INDIVIDUAL'S  MAILING ADDRESS ADDITIONAL SE 24a. ORGANIZATIO HCP HB2 No 24b. INDIVIDUAL'S  MAILING ADDRESS 60 Kilroy Air	ADD'L INFO RE ORGANIZATION DEBTOR BTOR'S EXACT FUL N'S NAME  LAST NAME  ADD'L INFO RE ORGANIZATION DEBTOR  CURED PARTY'S N N'S NAME ORTH Bay Manor, I AST NAME	23e. TYPE OF OF AME (or Name of	RGANIZATION 2  E - insert only one nerr  F  CO  RGANIZATION 2:  TOTAL ASSIGNEE) -	22f. JURISDICTION OF ORGANIZ  The (23a or 23b) - do not abbreviate  TY  One Reach	ATION	STATE  , 22g. ORG  MIDDLE N  STATE  23g. ORG	POSTAL CODE  SANIZATIONAL ID #, III  POSTAL CODE  ANIZATIONAL ID #, III  AME  POSTAL CODE	COUNTR  SUFFIX  COUNTR  SUFFIX  COUNTRY
c. MAILING ADDRESS d. SEEINSTRUCTION ADDITIONAL DE 230. ORGANIZATIO 230. INDIVIDUAL'S ADDITIONAL SE 240. ORGANIZATIO HCP HB2 No 240. INDIVIDUAL'S MAILING ADDRESS 60 Kilroy Airp ADDITIONAL SE 60 Kilroy Airp ADDITIONAL SE	ADD'L INFO RE ORGANIZATION DEBTOR BTOR'S EXACT FUL N'S NAME  LAST NAME  ADD'L INFO RE ORGANIZATION DEBTOR CURED PARTY'S N N'S NAME Orth Bay Manor, I AST NAME  Orth Way, Suite 30  CURED PARTY'S NAME	23e. TYPE OF OF AME (or Name of	RGANIZATION 2  E - insert only one nerr  F  CO  RGANIZATION 2:  TOTAL ASSIGNEE) -	22f. JURISDICTION OF ORGANIZ  The (23a or 23b) - do not abbreviate  TY  One Reach	ATION	STATE  , 22g. ORG  MIDDLE N  STATE  23g. ORG	POSTAL CODE  SANIZATIONAL ID #, III  POSTAL CODE  ANIZATIONAL ID #, III	COUNTR SUFFIX SUFFIX
226. INDIVIDUAL'S  ADDITIONAL DE 230. ORGANIZATIO  230. INDIVIDUAL'S  ADDITIONAL SE 240. ORGANIZATIO  ADDITIONAL SE 240. ORGANIZATIO  HCP HB2 No 246. INDIVIDUAL'S  MAILING ADDRESS  60 Kilroy Airy  ADDITIONAL SE 250. ORGANIZATIO	ADD'L INFO RE ORGANIZATION DEBTOR BTOR'S EXACT FUL N'S NAME LAST NAME LAST NAME LAST NAME CORGANIZATION DEBTOR CURED PARTY'S N'S NAME OF THE BAY Manor, I LAST NAME OF THE BAY MANOR OF THE BAY M	23e. TYPE OF OF AME (or Name of	RGANIZATION 2  E - insert only one nerr  F  CO  RGANIZATION 2:  TOTAL ASSIGNEE) -	22f. JURISDICTION OF ORGANIZ  10 (23a or 23b) - do not abbreviate  11 (23a or 23b) - do not abbreviate  12 (23a or 23b) - do not abbreviate  13 JURISDICTION OF ORGANIZ  15 JURISDICTION OF ORGANIZ  16 (24a or 24b)  17 (25) NAME	ATION	STATE  , 22g. ORG  MIDDLE N  STATE  23g. ORG	POSTAL CODE  SANIZATIONAL ID #, III  POSTAL CODE  ANIZATIONAL ID #, III  AME  POSTAL CODE	COUNTR  SUFFIX  COUNTR  SUFFIX  COUNTRY
226. INDIVIDUAL'S  ADDITIONAL DE 230. ORGANIZATIO  230. INDIVIDUAL'S  ADDITIONAL SE 240. ORGANIZATIO  ADDITIONAL SE 240. ORGANIZATIO  HCP HB2 No 246. INDIVIDUAL'S  MAILING ADDRESS  60 Kilroy Airy  ADDITIONAL SE 250. ORGANIZATIO	ADD'L INFO RE ORGANIZATION DEBTOR BTOR'S EXACT FUL N'S NAME LAST NAME LAST NAME LAST NAME CORGANIZATION DEBTOR CURED PARTY'S N'S NAME OF THE BAY Manor, I LAST NAME OF THE BAY MANOR OF THE BAY M	23e. TYPE OF OF AME (or Name of	RGANIZATION 2  E - insert only one nerr  F  CO  RGANIZATION 2:  TOTAL ASSIGNEE) -	22f. JURISDICTION OF ORGANIZ  The (23a or 23b) - do not abbreviate  TY  One Reach	ATION	STATE  , 22g. ORG  MIDDLE N  STATE  23g. ORG	POSTAL CODE  SANIZATIONAL ID #, III  POSTAL CODE  ANIZATIONAL ID #, III  AME  POSTAL CODE	COUNTR  SUFFIX  COUNTR  SUFFIX  COUNTRY
226. INDIVIDUAL'S  ADDITIONAL DE 230. ORGANIZATIO  230. INDIVIDUAL'S  ADDITIONAL SE 240. ORGANIZATIO  ADDITIONAL SE 240. ORGANIZATIO  HCP HB2 No 246. INDIVIDUAL'S  MAILING ADDRESS  60 Kilroy Airy  ADDITIONAL SE 250. ORGANIZATIO	ADD'L INFO RE ORGANIZATION DEBTOR BTOR'S EXACT FUL N'S NAME  LAST NAME  ADD'L INFO RE ORGANIZATION DEBTOR CURED PARTY'S N N'S NAME Orth Bay Manor, I AST NAME  Orth Way, Suite 30  CURED PARTY'S NAME	23e. TYPE OF OF AME (or Name of	RGANIZATION 2  E - insert only one nerr  F  C  RGANIZATION 2:  TOTAL ASSIGNEE) - i	22f. JURISDICTION OF ORGANIZ  The (23a or 23b) - do not abbreviate  TY  One Reach	ATION	STATE  , 22g. ORG  MIDDLE N  STATE  23g. ORG	POSTAL CODE  VAME  POSTAL CODE  ANIZATIONAL ID #, III	COUNTR  SUFFIX  COUNTR  SUFFIX  COUNTRY  USA
c. MAILING ADDRESS d. SEEINSTRUCTION ADDITIONAL DE 23a. ORGANIZATIO  ADDITIONAL SE 23b. INDIVIDUAL'S  MAILING ADDRESS ADDITIONAL SE 24a. ORGANIZATIO HCP HB2 No 24b. INDIVIDUAL'S ADDITIONAL SE 60 Kilroy Airy ADDITIONAL SE 25a. ORGANIZATIO HCP HB2 En 25b. INDIVIDUAL'S L	ADD'L INFO RE ORGANIZATION DEBTOR BTOR'S EXACT FUL N'S NAME LAST NAME LAST NAME LAST NAME CORGANIZATION DEBTOR CURED PARTY'S N'S NAME OF THE BAY Manor, I LAST NAME OF THE BAY MANOR OF THE BAY M	23e. TYPE OF OF AME (or Name of	RGANIZATION 2  E - insert only one nerr  F  C  RGANIZATION 2:  TOTAL ASSIGNEE) - i	22f. JURISDICTION OF ORGANIZ  The (23a or 23b) - do not abbreviate  TRST NAME  TY  LONG Beach  Insert only one name (25a or 25b)	ATION	STATE  , 22g. ORG  MIDDLE N  STATE  23g. ORG	POSTAL CODE  VAME  POSTAL CODE  ANIZATIONAL ID #, III	COUNTR  SUFFIX  COUNTR  SUFFIX  COUNTRY
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0701918072 Page: 10 of 19

## **UNOFFICIAL COPY**

FOLLOW INSTRUCTION 19. NAME OF FIRST [	DEBTOR (1a or 1b)	ON RELATED FINANCING	3 STATEMENT	1			
19a. ORGANIZATION	'S NAME	THE STANGEN	3 STATEMENT	ŀ			
OR WHHB1 Real	ty, L.L.C.						
196. INDIVIDUAL'S L	ASTINAME	FIRST NAME	MIDDLE NAME, SUFFIX				
			MADEL HAME, SOFFIX				
20 MISCELLANEOUS:							
	D <sub>C</sub> O <sub>O</sub>	) .					
1. ADDITIONAL DEB	OR'S EXACT EUL	1 F (A) MAN OF		THE ABOV	E SPAC	IS FOR FILING O	FFICE USE ON
21a, ORGANIZATION	S NAME	L.GFL NAME - insert only	one name (21a or 21b) - do not abbrevi	ate or combine na	nes.		THE SOL DIE
<u>,                                    </u>				•			
21b. INDIVIDUAL'S LA	ST NAME		FIRST NAME				
					MIDDLE	NAME	SUFFIX
c. MAILING ADDRESS			CITY		677		
d. SEEINSTRUCTIONS	I DO				STATE	POSTAL CODE	COUNTR
	ORGANIZATION	210. TYPE OF ORGANIZATION	2. JURISDICTION OF ORGANI	ZATION	21a. OF	RGANIZATIONAL ID#,	
ADDITIONAL DESC	DESTOR						ιτ any
22a. ORGANIZATION'S	NAME	LEGAL NAME - insert only o	ne name (22a o. 22b) - Lin not abbrevia	te or combine nam	105		
			0/				
22b. INDIVIDUAL'S LAS	TNAME		46				
1			FIRST NAME	,	MIDDLE	NAME	SUFFIX
. MAILING ADDRESS			<u> </u>		1		
			СПУ		STATE	POSTAL CODE	COUNTRY
SEEINSTRUCTIONS	ADD'L INFO RE  22	2e. TYPE OF ORGANIZATION	221. JURISDICTION OF ORGANIZ				
	DEBTOR			6	22g. OR	GANIZATIONAL ID#, if	any
ADDITIONAL DEBT	OR'S EXACT FULL L	EGAL NAME - insert only on	g name (23a or 23b) - do not abbreviate		4	<i>*</i>	
ZOE ORGANIZATION'S	NAME		- Annua (200 or 200) - do not appreviate	or combine name	<del></del>	<u> </u>	
23b. INDIVIDUAL'S LAS	FNAME						
STATE OF STATES	NAME		FIRST NAME	·	MIDDLE	IAME -	
MAILING ADDRESS							SUFFIX
			CITY	<del></del>	STATE	POSTAL CODE	COLUMNIA
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	DEBTOR I		23f. JURISDICTION OF ORGANIZA		23g. ORG	ANIZATIONAL ID #, H :	iny
ADDITIONAL SECUR	ED PARTY'S NAM	E for Name of TOTAL ADDICAL	EE) - insert only <u>one</u> name (24a or 24b)			-	
			cc) - insert only <u>one</u> name (24a or 24b)				
HCP HB2 Sakon 24b. INDIVIDUAL'S LAST	net Bay Manor,	LLC			_		
ATO INCIVIDUAL'S LAST	NAME		FIRST NAME		MIDDLE N	1115	
MAILING ADDRESS			1		MUDLE N	*ME	SUFFIX
60 Kilroy Airport	Way Code 200		CITY		STATE (F	POSTAL CODE	
DDITIONAL SECURI	TO BARTON		Long Beach	i i	_ 7	90806	COUNTRY
Sa. ORGANIZATION'S NA	ME YAR IY'S NAME	(or Name of TOTAL ASSIGNE	E) - insert only one name (25a or 25b)			× × × × × × × × × × × × × × × × × × ×	USA
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HCP HB3 Terraci	IAME	, LLL	EDETMAN				
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MAILING ADDRESS			<u> </u>	j			
A ****			ICITY				I
0 Kilroy Airport V	Way, Suite 300		Long Beach	1		OSTAL CODE	COUNTRY

FILING OFFICE COPY — UCC FINANCING STATEMENT ADDITIONAL PARTY (FORM UCC1AP) (REV. 05/22/02)

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## **UNOFFICIAL COPY**

UCC FINANCING STATEMENT ADDITIONAL PARTY

19.							
	NAME OF FIRST DE	BTOR (1a or 1b)	ON RELATED FINANCING	STATEMENT			
- {	19a. ORGANIZATION'S N	IAME		- 17 11 Carriery 4			
DR.	WHHB1 Realty	LLC		•			
אכ	19b. INDIVIDUAL'S LAST	NAME	FIRST NAME	MIDDLE NAME SUFFIX			
į				MOSEL WINE, COLLY			
	MICOELL ANDONE						
	MISCELLANEOUS:			1			
	ADDITIONAL DEBTO 21a, ORGANIZATION'S N 21b, INDIVIDUAL'S LAST	IOME	L LE AL NAME - insert only gi	name (21a or 21b) - do not abbreviate or combi	ine names	IS FOR FILING OF	FICE USE ONLY
				FIRST NAME	MIDDLE	NAME	SUFFIX
216	MAILING ADDRESS	· ·		/			
	HUNTERS			CITY	STATE	POSTAL CODE	COUNTRY
1d.	SEEINSTRUCTIONS	IADDI NEO DE	216. TYPE OF ORGANIZATION	0/			İ
	<u>and in the Hortz</u>	ORGANIZATION	230. TYPE OF ORGANIZATION	2. URISDICTION OF ORGANIZATION	21g. OR	GANIZATIONAL ID #,	fany
_		DEBTOR			1		ΠN
2. / [	ADDITIONAL DEBTO 22a. ORGANIZATION'S N	R'S EXACT FUL	L LEGAL NAME - insert only or	name (22a or) us not abbreviate or combine	ne names		
	EZZ. ONGANIZATIONS N	IAME					
R	22b. INDIVIDUAL'S LAST			46			
	22B. INDIVIDUAL'S LAST	NAME	· · · · · · · · · · · · · · · · · · ·	FIRST NAME	MIDDLE	NAME	SUFFIX
- 1							
_1	·						
2c.	MAILING ADDRESS			CITY	STATE	POSTAL CODE	
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	MAILING ADDRESS SEE INSTRUCTIONS	ADD'L INFO RE	220. TYPE OF ORGANIZATION	CITY  22f. JURISDICTION OF ORGANIZATION			COUNTRY
		ADD'L INFO RE ORGANIZATION DEBTOR	220. TYPE OF ORGANIZATION	C		POSTAL CODE	COUNTRY
2d. ;	SEE INSTRUCTIONS  ADDITIONAL DEBTO	ORGANIZATION DEBTOR R'S EXACT FUL	İ	22f. JURISDICTION OF ORGANIZATION	22g. OR		COUNTRY
2d. ;	SEEINSTRUCTIONS	ORGANIZATION DEBTOR R'S EXACT FUL	İ	C	22g. OR		COUNTRY
2d.	SEE INSTRUCTIONS  ADDITIONAL DEBTO	ORGANIZATION DEBTOR R'S EXACT FUL	İ	22f. JURISDICTION OF ORGANIZATION	22g. OR		COUNTRY
2d.	SEE INSTRUCTIONS  ADDITIONAL DEBTO	ORGANIZATION DEBTOR R'S EXACT FUL AME	İ	22f. JURISDICTION OF ORGANIZATION	22g. OR	GANIZATIONAL ID #, i	COUNTRY
2d.	SEE INSTRUCTIONS  ADDITIONAL DEBTO 238. ORGANIZATION'S N.	ORGANIZATION DEBTOR R'S EXACT FUL AME	İ	22f. JURISDICTION OF ORGANIZATION  a name (23a or 23b) - do not abbreviate or combin	22g. OR	GANIZATIONAL ID #, i	COUNTRY
3. /	SEE INSTRUCTIONS  ADDITIONAL DEBTO 238. ORGANIZATION'S N.	ORGANIZATION DEBTOR R'S EXACT FUL AME	İ	22f. JURISDICTION OF ORGANIZATION  2 name (23a or 23b) - do not abbreviste or combin	22g. OR The names  MIDDLE	GANIZATIONAL ID #, i	COUNTRY
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### ATTACHMENT TO UCC-1 FINANCING STATEMENT

DEBTOR/LESSEE:

D 1000 17

WHHB1 REALTY, L.L.C., a Delaware limited liability company; WHBHT REAL ESTATE LIMITED PARTNERSHIP, a Delaware limited partnership; SENIOR LIFESTYLE NEWPORT LIMITED PARTNERSHIP, a Delaware limited partnership; WEST BAY MANOR, L.L.C., a Delaware limited liability company; INTEGRATED LIVING COMMUNITIES OF SARASOTA, L.L.C., a Delaware limited liability company; INTEGRATED MANAGEMENT -CARRINGTON POINTE, L.L.C., a Delaware limited liability company; SOUTH BAY MANOR, L.L.C., a Delaware limited liability company; SENIOR LIFESTYLE PROSPERITY LIMITED PARTNERSHIP, a Delaware limited partnership; SENIOR LIFESTYLE PINECREST LIMITED PARTNERSHIP, a Delaware limited partnership; OLYMPIA FIELDS SENIOR HOUSING, L.L.C., a Delaware limited li ibility company; SENIOR LIFESTYLE NORTH BAY LIM TED PARTNERSHIP, a Delaware limited partnership; INTEGRATED LIVING COMMUNITIES OF WEST PALM BEACH, I.L.C., a Delaware limited liability company; SENIOR LIFEST YLE HERITAGE, L.L.C., a Delaware limited liability corprany; GREENWICH BAY, L.L.C., a Delaware limited liability company; SENIOR LIFESTYLE EMERALD BAY LIMITED PARTNERSHIP, a Delaware limited partnership; CHEKRY HILLS CLUB, L.L.C., a Delaware limited liability company; SENIOR LIFESTYLE EAST BAY LIMITED PARTNERSHIP, a Delaware limited partnership; SENIOR LIFESTYLE SALCONNET BAY LIMITED PARTNERSHIP, a Delaware linited partnership; and NILES LIFESTYLE LIMITED PARTNERSHIP, an Illinois limited partnership

SECURED PARTY/LESSOR:

HCP HB2 WATERSIDE RETIREMENT ESTATES, L.C, a Delaware limited liability company; HCP HB2 PARK AT GOLF MILL, LLC, a Delaware limited liability company; HCP HB2 MANOR – POINTE NEWPORT PLACE, LLC, a Delaware limited liability company; HCP HB2 PINECREST PLACE, LLC, a Delaware limited liability company; HCP HB2 SOUTH BAY MANOR, LLC, a Delaware limited liability company; HCP HB2 HERONS RUN, LLC, a Delaware limited liability company; HCP HB2 PARK AT VERNON HILLS, LLC; a Delaware limited liability company; HCP HB3 SPRING SHADOWS PLACE, LLC, a Delaware limited liability company; HCP HB3 WILLOWBROOK, LLC, a Delaware limited liability company; HCP HB3 FIRST COLONY, LLC, a Delaware limited liability company;

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SECURED PARTY/LESSOR:

HCP HB2 GREENWICH - EAST-WEST BAY - OLYMPIA FIELDS, LLC, a Delaware limited liability company; HCP HB2 CARRINGTON-CHERRY HILLS, LLC, a Delaware limited liability company; HCP HB2 HERITAGE PALMERAS, LLC, a Delaware limited liability company; HCP HB2 PROSPERITY OAKS, LLC, a Delaware limited liability company; HCP HB2 NORTH BAY MANOR, LLC, a Property liab.

Of County Clark's Office Delaware limited liability company; HCP HB2 EMERALD BAY MANOR, LLC, a Delaware limited liability company; HCP HB2 SAKONNET BAY MANOR, LLC, a Delaware limited liability company; HCP HB3 TERRACE MEMORIAL CITY, LLC, a Delaware limited liability company; HCP HB3 company; and HCP HB3 CLEAR LAKE, LLC, a Delaware limited

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#### EXHIBIT A

#### DESCRIPTION OF COLLATERAL

This collateral is subject to a true lease by and between Debtor, as the current "Tenant," and Secured Party, as the current "Landlord," dated as of October 5, 2006, as amended by that certain First Amendment to Amended and Restated Master Lease Agreement dated as of December 15, 2006, and certain matters therein which have been confirmed by that certain Confirmation of Restatement Date dated as of December 21, 2006 (as the same may be further amended or modified pursuant to its terms, collectively, the "Lease"); however, this filing is for precautionary purposes only.

This filing covers all improvements, related rights and fixtures, and personal property, tangible or intangible and any additions to, substitutions for, changes in, or replacements of the whole or any part thereof including but not limited to:

- (a) the Facility(ies) (as hereinafter defined), all buildings, structures and other improvements of every kind, including, but not limited to, all roofs, plumbing systems, electric systems and HVAC systems, roadways, alleyways, parking areas, sidewalks, curbs, connecting tunnels, utility pipes, conduits and lines, on-site and off-site) appurtenant to or presently situated upon the Land (as hereinafter defined) (collectively, the "Leased Improvements");;
- (b) all easements, rights and appurtenances relating to the Land and the Leased Improvements;
  - (c) all P&E (as hereinafter defined) and Inventory (as hereinafter defined);
- (d) all movable machinery, equipment, furniture, furnishings, moveable walls or partitions, computers or trade fixtures located on or in the Lease I Improvements, and all modifications, replacements, alterations and additions to such property, but specifically excluding all items included within the category of Tenant's Personal Inc perty (as hereinafter defined);
  - (e) all of the Leased Intangible Property (as hereinafter defined);
- (f) any and all subleases of space in the Leased Improvements to subtenants
- (g) all proceeds of any and all of the foregoing collateral. For purposes of this Financing Statement, the term "proceeds" includes whatever is receivable or received when any of the collateral or proceeds are sold, exchanged, collected or otherwise disposed of, whether such disposition is voluntary or involuntary.

For purposes of this Financing Statement, the following terms shall have the following meanings:

"Affiliated Person" shall mean, with respect to any Person, (i) any Person directly or indirectly Controlling, Controlled by or under common Control with any such Person, (ii) in the case of any such Person which is a partnership, any general partner in such partnership, (iii) in the case of any such Person which is a limited liability company, any managing member of such company, and (iv) any other Person which is a Parent, a Subsidiary, or a Subsidiary of a

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#### **EXHIBIT A - CONTINUED**

Parent with respect to such Person or to one or more of the Persons referred to in the preceding clauses (i) through (iii). Provided, however, a Person shall not be deemed to be an Affiliated Person solely by virtue of the ownership of shares of stock registered under the Securities Act of 1934, as amended, unless such Person, as holder of such stock, is required to file a Schedule 13 D, pursuant to Section 13(d) of such Act and Rule 13 d-1 promulgated thereunder.

"Control" (including the correlative meanings of the terms "Controlling," "Controlled by," and "under common control with") as used with respect to any Person, shall mean the possession, directly or indirectly, of the power to direct or cause the direction of the management policies of such Person whether through the ownership of voting securities, by contract or other wise.

"Entity" shall mean any corporation, general or limited partnership, limited liability company, partnership, stock company or association, joint venture, association, company, trust, bank, trust company, land trust, business trust, cooperative, any government agency or political subdivision thereof or any other entity.

"Facility" shall mean each facility being (and to be) operated on the applicable Land.

"Initial Landlord P&E" shall mean and refer to with respect to each Facility, all P&E of any kind or description which are located on or in the Leased Improvements of such Facility as of the applicable commencement date for soon Facility, but specifically excluding any specific items of Tenant's Personal Property identified on <u>Exhibit B</u> attached hereto and made a part hereof.

"Inventories" shall mean all inventories, as such term is customarily used and defined in its most broad and inclusive sense including, but not limited to, all inventories of food, beverages and other consumables held by Debtor for sale or use at or from the leased property of any Facility, and soap, cleaning supplies, paper supplies, operating supplies, china, glassware, silver, linen, uniforms, building and maintenance supplies, spare parts and attic stock medical supplies, drugs and all other such goods, wares and merchandise held by Debtor for sale to or for consumption by residents of the leased property of such Facility and all such other good; returned to or repossessed by Debtor.

"Land" shall mean, collectively, all of those certain tracts, pieces and parcels of land, as more particularly described on <u>Schedule 1</u> annexed hereto and made a part hereof.

"Leased Intangible Property" shall mean all transferable or assignable (a) governmental permits, including licenses and authorizations, required for the construction, ownership and operation of the Leased Improvements of each Facility, including, but not limited to, licenses related to the Permitted Use of such Facility, certificates of occupancy, building permits, signage permits, site use approvals, zoning certificates, environmental and land use permits and any and all necessary approvals from state or local authorities and other approvals granted by any public body or by any private party pursuant to a recorded instrument relating to such Leased Improvements or the Land; (b) development rights, trade names, telephone

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#### **EXHIBIT A - CONTINUED**

exchange numbers identified with the leased property of each Facility, if any (specifically excluding, however, any specific items of Tenant's Personal Property identified on Exhibit B hereto); and (c) certificates, licenses, warranties and guarantees and contracts other than such permits, operating permits, certificates, licenses and approvals which are to be held by, or transferred to, the Debtor in order to permit the Debtor to operate such Leased Improvements of each Facility in accordance with the terms of the Lease.

"Manager" shall mean the Person designated by, and acting as Manager with respect to "ny Facility pursuant to, a management agreement.

"J&E" shall mean with respect to each Facility, all items of personal property, as defined under the Model Uniform Commercial Code, including, but not limited to, but without duplication: (a) all equipment, machinery, fixtures, and other items of property, now or hereafter permanently affixed to or incorporated into the Leased Improvements of such Facility, including, but not limited to, all furnaces, boilers, heaters, electrical equipment, heating, plumbing, lighting, ventilating, refrigerating, incincration, air and water pollution control, waste disposal, air-cooling and air-conditioning systems and apparatus, sprinkler systems and fire and theft protection equipment, all of which, to the maximum extent permitted by law, are hereby deemed by the parties hereto to constitute real estate, toggater with all replacements, modifications, alterations and additions thereto; (b) all furniture, furnishings, movable walls or partitions, computers or trade fixtures or other personal property of any kind or description used or useful in Debtor's business on or in the Leased Improvements of such Cacility, and located on or in the Leased Improvements of such Facility, and all modifications, replacements, alterations and additions to such personal property; (c) all linen, china, glassware, table vare, uniforms and similar items, whether used in connection with public space or tenant rooms; and (d) "Property and Equipment," "P&E," and "FF&E" (as such terms are customarily used and defined in the most broad and inclusive sense), as well as all other items included within the category of Inventory; and all including, but not limited to, the Initial Landlord P&E, but not including, however, any item of Tenant's Personal Property.

"Parent" shall mean, with respect to any Person, any Person which in actly, or indirectly through one or more Subsidiaries or Affiliated Persons, (i) owns more than fifty percent (50%) of the voting or beneficial interest in, or (ii) otherwise has the right or power (whether by contract, through ownership of securities or otherwise) to control, such Person.

"Permitted Use" shall mean with respect to each Facility, any use of the leased property of such Facility permitted pursuant to Section 4.1.1 of the Lease.

"Person" shall mean any individual or Entity, and the heirs, executors, administrators, legal representatives, successors and assigns of such Person where the context so admits.

"Subsidiary" shall mean, with respect to any Person, any Entity in which such Person directly, or indirectly through one or more Subsidiaries or Affiliated Persons, (a) owns more than fifty percent (50%) of the voting or beneficial interest or (b) which such Person

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#### **EXHIBIT A - CONTINUED**

otherwise has the right or power to Control (whether by contract, through ownership of securities or otherwise).

"Tenant's Personal Property" shall mean with respect to each Facility, any specific items of P&E listed on Exhibit B to this Financing Statement, or replacements for such items or items within any specific categories of P&E listed on Exhibit B to this Financing Statement which hereafter are acquired by Debtor with its own funds after the applicable commencement date for such Facility and located at the leased property of such Facility.

The filing of the financing statement shall not be construed to derogate from or impair the lien or provisions of the Lease, from Debtor/Lessee, for the benefit of Secured Party/Lessor. The intention of Debtor/Lessee and Secured Party/Lessor is that everything used in connection with the production of income from the Land or Leased Improvements or adapted for use therein is, and at all times and for all purposes and in all proceedings, both legal and equitable, shall be regarded as property and part of the real property encumbered by such Lease, irrespective of whether or not the same is physically attached to the improvements thereon. Similarly, nothing in this financing statement shall be construed to alter any of the rights of Secured Party/Lessor as determined by the Lease or the priority of the Secured Party's/Lessor's lien created thereby. This financing statement is declared to be 16 the protection of Secured Party/Lessor in the event any court shall at any time hold that notice of Secured Party's/Lessor's priority of interest in any property or interests described in such Lease must be in order to be effective against a particular class of persons, including, but not limited to, the United States Government and any agencies thereof, be filed in the office wherein this financing statement is filed.

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#### EXHIBIT B

#### **INITIAL TENANT PERSONAL PROPERTY**

Initial Tenant Personal Property shall mean, with respect to the leased property: (i) any right, title or interest in the names "Horizon Bay" or "Horizon Bay Senior Communities" or any combination or variation thereof or any other trademark or trade name filed by Manager or Debtor; (ii) all property owned by Debtor or any of its Affiliated Persons, not normally located at the leased property and used, but not exclusively, in connection with the operation of the leased property; (iii) all items, tangible or intangible, consisting of Proprietary Information (as defined below); (iv) on puter software and accompanying documentation (including all future upgrades, enhancements, additions, substitutions and modifications thereof), which are used by Debtor or Manager or any Affliated Person of Debtor or Manager in connection with the property management system and all future electronic systems developed by Debtor or Manager or any of its or their Affiliated Persons for use with respect to the leased property; (v) all books, ledger sheets, files and records, our not any information therein relating to the leased property except as otherwise excluded hereunder: (vi) all contracts pertaining to the operation of the leased property other than any contracts assigned to Secured Party or its predecessor in interest in connection with the acquisition of the Facility, (vii) software, manuals, brochures or directives used by Debtor or Manager or any of its or their Affiliated Persons, in the operation of the leased property (not including data regarding the lossed property as opposed to leased property operations), (viii) any van, car or other motor vehicle, and (ix) any care licenses (e.g., skilled nursing, assisted living, and Alzheimer's dementia care licenses) and liquor licenses.

As used herein, "<u>Proprietary Information</u>" shall med (a) all computer software and accompanying documentation (including all future upgraded, enhancements, additions, substitutions and modifications thereof), other than that which is commercially available, which are used by Debtor or the Manager or any of its or their Affiliated Parsons in connection with the property management system and all future electronic systems developed by the Debtor or the Manager or any of its or their Affiliated Persons for use with respect to the leased property, (b) all manuals, brochures and directives used by the Debtor or the Manager or any of its or their Affiliated Persons with respect to the procedures and techniques to be used in operating the leased property, and (c) employee records which must remain confidential either under applicable legal requirements or under reasonable corporate policies of the Debtor or the Manager or any of its or their Affiliated Persons.

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#### SCHEDULE 1

#### **LEGAL DESCRIPTION** (Olympia Fields)

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3 NORTHWEST 1/2 OF SECTION
MMERCIAL PARK 3<sup>10</sup> ADDITION,
2 CTION 1/2, IN TOWNSHIP 35 NORTH, RA
IERDIAN, ACCORDING TO THE PLAT THEA.

DOCUMENT NO. 37-44523, IN COOK COUNTY, IL.

PIN: 31-14-103-001-0000