UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] Phone (800) 331-3282 Fax (818) 662-4141 B. SEND ACKNOWLEDGEMENT TO: (Name and Mailing Address) 18047 THE BANK OF NE **UCC Direct Services** 12248105 P.O. Box 29071 Glendale, CA 91209-9071

Doc#: 0729206049 Fee: \$30.50 Eugene "Gene" Moore RHSP Fee:\$10.00 Cook County Recorder of Deeds

Date: 10/19/2007 09:43 AM Pg: 1 of 4

Also creek one of the following three boxes and provide appropriate information in items. CHANGE name and/or address: Give current record name in item is a or (2); also give new	esecurity interest(s) of the Secured Party authorizing this Coress of assignee in 7c; and also give name of assignor red Party of record. Check only one of these two boxes. 6 and/or 7. DELETE name: Give record name ADD name: Committee of the security interests and the security interests of the security interests.	ntinuation Statement is
ASSIGNMENT (FULL or partial): Give name of assignee in item 7a or 7b and addres. AMENDMENT (PARTY INFORMATION): This Amendment meets Debtor or Security Also check one of the following three boxes and provide appround to information in items CHANGE name and/or address: Give current record name in item 3a or 6 to, also give new name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c. CURRENT RECORD INFORMATION:	iss of assignee in 7c; and also give name of assignor red Party of record. Check only one of these two boxes. 6 and/or 7. DELETE name: Give record name ADD name: Comp	r in item 9.
Also check one of the following three boxes and provide appropriate information in items. CHANGE name and/or address: Give current record name in item pa or 6 2; also give new name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c. CURRENT RECORD INFORMATION:	red Party of record. Check only one of these two boxes. 6 and/or 7. DELETE name: Give record name ADD name: Common ADD name.	plete item 7a or 7b, and also
Also check one of the following three boxes and provide appropriate information in items. CHANGE name and/or address: Give current record name in item (a or 6); also give new name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c. CURRENT RECORD INFORMATION:	red Party of record. Check only one of these two boxes. 6 and/or 7. DELETE name: Give record name ADD name: Common ADD name.	plete item 7a or 7b, and also
Also check one of the following three boxes and provide appropriate information in items. CHANGE name and/or address: Give current record name in item pa or 6 2; also give new name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c. CURRENT RECORD INFORMATION:	6 and/or 7. DELETE name: Give record name ADD name: Comp	plete item 7a or 7b. and also plete items 7d-7g (if applicabl
. CURRENT RECORD INFORMATION:	to be detect in term to a or ob item /c; also com	nplete items 7d-7g (if applicabl
6a. ORGANIZATION'S NAME		
A		
- ·		
6b. INDIVIDUAL'S LAST NAME FIRST NAME	MIDDLE ALLANG	
	MIDDLE NAME	SUFFIX
CHANCED (MEIA) OF APPEN MARCHINE		
CHANGED (NEW) OR ADDED INFORMATION: 7a ORGANIZATION'S NAME	<u> </u>	
	1)x.	
THE BANK OF NEW YORK TRUST COMPANY, N.	A	
75. INDIVIDUAL'S LAST NAME FIRST NAME	MIDDLE NAME	SUFFIX
	C 2	
MAILING ADDRESS CITY	STATE POSTAL CODE	COUNTRY
601 TRAVIS STREET HOUSTO	N 77002	COUNTY
SEE INSTRUCTION ADD'L INFO RE 7e. TYPE OF ORGANIZATION 7f. JURISDICTION 7f. JURISDICTION	OF ORGANIZATION 79. ORGANIZATIONAL ID #	t, if any
AMENDMENT (COLLATERAL CHANGE): check only one box.		NONE
Describe collateral deleted or added, or give entire restated collateral description, or d	describe collateral Vassigned	
parcel numbers: 17183220340000 17183220360000 17183230150000 1	1719325030000	

9. NAME OF SECURED PARTY OF RECORD AUTHORIZIN adds collateral or adds the authorizing Debtor, or if this is a Term 9a ORGANIZATION'S NAME	NG THIS AMENDMENT (name of assignor, if this is	an Assignment). If this is an Amendment autho	rized by a Debtor which
99. ORGANIZATION'S NAME BANK ONE, NATIONAL ASSOC	, and an an and an and an an a	r name of DEBTOR authorizing this Amendme	nt.
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
10. OPTIONAL FILER REFERENCE DATA			

10. OPTIONAL FILER REFERENCE DATA 12248105 Debtor Name: Cole Taylor Bank, an Illinois banking corporation, not individually or personally but solely in its capacity as trustee under the amended and restated 10212538 089672 (DA 91209-90/1 Tel (800) 331-3282

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UCC FINANCING STATEME FOLLOW INSTRUCTIONS (front and	NT AMENDME back) CAREFULLY	NT ADDENDUM
11. INITIAL FINANCING STATEMENT FI	E # (same as item 1a on Am	pendment form)
0021145933 10/18/02	CC IL Cook+	
12. NAME of PARTY AUTHORIZING THIS AME	NDMENT (same as item 9 on An	nendment form)
OR 129. ORGANIZATION'S NAME BANK ONE, NATION 129. INDIVIDUAL'S LAST NAME	AL ASSOCIATIO	N, AS TRUSTEsame as item9. MIDDLE NAME, SUFFIX
13. Use this space for additional inform	ation	
		THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

- ùFULL TEXT OF ITEM 9. BANK ONE, NATIONAL ASSOCIATION, AS TRUSTEE UNDER THE INDENTURE OF TRUST Of Coot County Clark's Office DATED AS OF OCTOBER 1, 2002 WITH THE ILLINOIS DE

http://www.ccrd.info/CCRD/controller?commandflag=getDetails&optflag=DetailsCommand&cou...01/1985&todate=07/31/2007&proptype=&pin=17161070371181§ion=29&township=36&range=12

Prior Document

Trust Number:-	Name: BANK		Grantee(s)
Name: COLE TAYLOR Trust Number:	Name: COLE TAYLOR		Grantor(s)
A STREET AND A STR		Homodood Hiladika dadd Billachaa ee e	n 1922 te de la Republica de l Republica de la Republica de l
)		UPIN	17-18-325-026- 0000
		UPIN	17-18-323-015- 0000
		UPIN	17-18-322-036- 0000
		UPIN	17-18-322-034- 0000
STATE OF THE STATE		35	Property Description

http://www.ccrd.info/CCRD/controller?commandflag=getDctails&optflag=DctailsCommand&cou...01/1985&todate=07/31/2007&proptype=&pin=17161070371181§ion=29&township=36&range=12

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