Doc#: 0801722063 Fee: \$26.50 Eugene "Gene" Moore RHSP Fee: \$10.00

UCC FINANCING STATEMENT AMENDMENT		Date: 01/17/2008 11:49 AM Pg: 1 of 2	
FOLLOW INSTRUCTIONS (front and back) CAREFULLY  A. NAME & PHONE OF CONTACT AT FILER [optional]	*		···· / 9.   0 2
B. SEND ACKNOWLEDGMENT TO: (Name and Address)			
[-	<del>-</del>		
' EVANSTON INSURANCE COMPANY	ľ	the second second	
C/O UNIVERSAL ASSURORS AGENO	CY INC.		
11420 BLONDO STREET, SUITE 1	103		
OMAHA, NE 68164-3858			
	1		
		AROVE CRACE IS FOR FILING OFFICE	
1a. INITIAL FINANCING STATEMEN, FILE#		ABOVE SPACE IS FOR FILING OFFICE  1b. This FINANCING STATEN	
0707506139 3/16/2007	WAIT	to be filed [for record] (or r	recorded) in the
2 TERMINATION: Effectiveness of the Financing Statement identified above in	is terminated with respect to security into	erest(s) of the Secured Party authorizing this Term	nination Statement.
CONTINUATION: Effectiveness of the rinr noing Statement identified about continued for the additional period provided try applicable law.	ove with respect to security interest(s) of	of the Secured Party authorizing this Continuation	n Statement is
4 X ASSIGNMENT (full or partial): Give name of ass gner in tem 7a or 7b and	address of assignee in item 7c; and also	give name of assignor in item 9.	
	btor or Secured Party of record.	Check only one of these two boxes.	
Also check one of the following three boxes and provide appropria e information in i			
CHANGE name and/or address: Give current record name in item 6 or 'b; als name (if name change) in item 7a or 7b and/or new address (if address name	o give new DELETE name: Giv ) in item 7c. to be deleted in item	re record name ADD name: Complete item 6a or 6b. item 7c; also complete item	m 7a or 7b, and also ms 7d-7g (if applicable).
6. CURRENT RECORD INFORMATION:  [6a. ORGANIZATION'S NAME]			
OR 6b. INDIVIDUAL'S LAST NAME	FIRTNAME	MIDDLE NAME	SUFFIX
MCNULTY	THOMAS		SOFFIX
7. CHANGED (NEW) OR ADDED INFORMATION:	$+$ $\sim \lambda$		
7a. ORGANIZATION'S NAME	1011X		
OR EVANSTON INSURANCE COMPANY 75. INDIVIDUAL'S LAST NAME		1/10/08	
75. INDIVIDUAL'S EAST NAME	IRST NAME	MIDDLE NAME	SUFFIX
7c. MAILING ADDRESS		4	
11420 BLONDO STREET SUITE 103	ОМАНА	STATE POSTAL CODE	COUNTRY
7d. TAX ID #: SSN OR EIN ADD'L INFO RE   7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATI	NE 68164 ON 70 ORGANIZATIONAL ID #, if a	USA
* ORGANIZATION T REQUIRED IN WISCONSIN DEBTOR	,		
8. AMÉNDMENT (COLLATERAL CHANGE): check only one box.		assigned.	NONE
	al description, or describe collateral	assigned.	
WINDOWS — —			
PARCEL ID: 27-24-312-011-0000		, C,	
770.7			
LEGAL: SEE ATTACHMENT "A"			
CITILATE IN THE COUNTY OF COOK CHARD C	NP TILINATO	•	
SITUATE IN THE COUNTY OF COOK, STATE C	F ILLINUIS		
ADDRESS: 7757 NOTTINGHAM DR. TINLEY PA	DV TT 60477		
IDDALIGO. //S/ NOTTINGHAI DR. TINDET TE	uk, 11 004//		
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AME	NDMENT (name of assignor, if this is	an Assignment). If this is an Amendment authoriz	ed by a Debtor which
adds collateral or adds the authorizing Debtor, or if this is a Termination authorized to 9a. ORGANIZATION'S NAME	by a Debtor, check here and enter r	ame of DEBTOR authorizing this Amendment.	
FIRST MUTUAL BANK			<del></del>
OR 9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDÖLE NAME	POLICEIV
		Ween House	SUFFIX

FILING OFFICE COPY -- NATIONAL UCC FINANCING STATEMENT AMENDMENT (FORM UCC3) (REV. 07/29/98)

10. OPTIONAL FILER REFERENCE DATA

MCNULTY, T, 52-117014-08

\* An Individual's social security number is not required to be placed on the form in Wisconsin (See Instructions)

0801722063 Page: 2 of 2

## **UNOFFICIAL COPY**

## ATTACHMENT "A"

LEGAL: LOT 825 IN BREMEN TOWNE ESTATES UNIT 6, PHASE 2, BEING A SUBDIVISION OF THE NORTH WEST ¼ OF THE SOUTH WEST ¼ OF SECTION 24, OF THE SOUTH WEST ¼ OF THE SOUTH WEST OF SECTION 24, OF THE SOUTH EAST ¼ OF THE SOUTH WEST ¼ OF SECTION 24; OF PART OF THE NORTH EAST ¼ OF THE SOUTH WEST ¼ OF THE SECTION 24; ALSO OF PART OF THE NORTH EAST ¼ OF THE NORTH WEST ¼ OF SECTION 25; OF PART OF THE NORTH EAST ¼ OF THE NORTH WEST ¼ OF SECTION 25, TOWNSHIP 36 The ANGLE STLLING IN COLUMNIA NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.