UCC FINANCING STATEMENT

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 Address)

UCC Direct Services
P.O. Box 29071
Glendale, CA 91209-9071

FIXTURE

Doc#: 0808410029 Fee: \$38.50 Eugene "Gene" Moore RHSP Fee:\$10.00 Cook County Recorder of Deeds

Date: 03/24/2008 10:22 AM Pg: 1 of 2

		FIIC WILL.	CO IL COOK , IL	IH	E ABOVE SPACE IS F	OR FILING OFFICE USE ON	L, T
. Di	EBTOR'S EXACT FULI	LI GA NAME	insert only one debtor name (1	a or 1b) - do not abbreviate or	combine names		
	1a. ORGANIZATION'S NA						
R	1b. INDIVIDUAL'S LAST NAME			TFIRST NAME		DDLE NAME	SUFFIX
	VARGAS	(MARTHA	E		
42	8 JEROME P	LACE	Ox	WHEELING	TR II	- POSTAL CODE - 60090	USA
ld. <u>S</u>	EE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF OP SANIZ ATION	1f. JURISDICTION OF ORGANI	ZATION 1g	. ORGANIZATIONAL ID #, if a	any NONE
2. A	DDITIONAL DEBTOR'S	EXACT FULL L	EGAL NAME - insert on y or a c	ebtor name (2a or 2b) - do not	t abbreviate or comb	oine names	
	2a. ORGANIZATION'S NA		7				
R	2b. INDIVIDUAL'S LAST N	IAME		FIRST NAME	Mil	DDLE NAME	SUFFiX
2c. N	MAILING ADDRESS			CITY	ST	ATE POSTAL CODE	COUNTRY
	EE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF CRGAN),	. ORGANIZATIONAL ID #, if a	any NONE
3. \$			TOTAL ASSIGNEE of ASSIGN	OR S/P) - insert only one secu	rru party name (3a	or 3b)	
PRIME ACCEPTANCE CORP.							
R	3b. INDIVIDUAL'S LAST N	AME		FIRST NAME	SMI	DDLE NAME	SUFFIX
	O W JACKSO	N BLVD.	SUITE 720	CHICAGO	s	POSTAL CODE	USA

RAINSOFT WATER SYSTEM

4. This FINANCING STATEMENT covers the following collateral:

Parcel ID: 03-12-113-020-0000

5. ALTERNATIVE DESIGNATION (if applicable) LESSEE/LESSOF		AG. LIEN NON-UCC FILING
This FINANCING STATEMENT is to be filed [for record] (or record) ESTATE RECORDS. Attach Addendum.	orded) in the REAL. 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [if applicable] [ADDITIONAL FEE] [optional]	All Debtors Debtor 1 Debtor 2
8. OPTIONAL FILER REFERENCE DATA		
13759451	650090314	y ·

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UNOFFICIAL COPY

FINANCING STATEME	NT ADDENDUM					
9. NAME OF FIRST DEBTOR (1a or 1b)	IENT					
96 INDIVIDUAL'S LAST NAME VARGAS	FIRST NAME MARTHA	MIDDLE NAME, SUFFIX				
0. MISCELLANEOUS						
3759451-IL-31						
4						
10656 PRIME ACCEPTAN						
File with: CC IL Cook+, IL 650	090314		THE ABOVE SPAC	CE IS FOI	R FILING OFFICE USE	ONLY
11. ADDITIONAL DEBTOR'S EXACT F	UL LEGAL NAME - insert only one n	ame (11a or 11b) - do not	abbreviate or combine	e names	3	
11a. ORGANIZATION'S NAME	9					
DR 11b. INDIVIDUAL'S LAST NAME	11h INDIVIDUAL'S LAST NAME			MIDDLE	NAME	SUFFIX
			_			
11c. MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
11d. SEE INSTRUCTION ADD'L INFO		11f. JURISDICTION OF ORG	GANIZATION	11g. OR	GANIZATIONAL ID#, i	— T
DEBTOR						NONE
12. ADDITIONAL SECURED PAR 12a. ORGANIZATION'S NAME	TY'S or ASSIGNOR S/P's N	AME - insert only <u>one</u> nam	e (12a or 12b)			
OR 12b. INDIVIDUAL'S LAST NAME.	[FIRST NAM2		MIDDLE	NAME	SUFFIX	
122. (10.00.001.2.0.0.0.7.)						
12c. MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
			-/-			
13. This FINANCING STATEMENT covers collateral or is filed as a X fixture filir	timber to be cut or as-extracted	16. Additional collateral des	script.on:			
Collatoral of 10 Mod 25 2	·9·		7.0			
14. Description of real estate:			9.			
Description: LOT 12 IN BLOCI UNIT 3 BEING A SUBDIVISION	N OF SECTIONS 11 AND 12				Ĉ.	
TOWNSHIP 42 NORTH, RANG PRINCIPAL MERIDIAN, IN CO	GE 11 EAST OF THE THIRD					
PERMANENT REAL ESTATE	NUMBER: El ID: 03-12-113-020-0000				Ö	
03-12-113-020-0000. Paice	(1 ID. 03-12-1 13-020-0000					
15. Name and address of a RECORD OWNE	D of about described real artists					
(if Debtor does not have a record interes						
		17. Check only if applicable			· <u>·</u>	
			Trustee acting with respe	ect to prop	perty held in trust o	Decedent's Estate
	18. Check <u>only</u> if applicable and check <u>only</u> one box.					
	Debtor is a TRANSMITTING UTILITY Filed in connection with a Manufactured-Home Transaction effective 30 years					
		Lined throphiliportion with	Ta manadada Tiomo	ansacio		