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UCC FINANCING STATEMENT
FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

THE NORTHERN TRUST COMAPNY
3000 LEADENHALL ROAD

MT. LAUREL, NJ 08054

1. DEBTOR'S EXACT FULL LECAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or contact and insert only one debtor name (1a or 1b) - do not abbreviate or contact and insert only one debtor name (1a or 1b) - do not abbreviate or contact and insert only one debtor name (1a or 1b) - do not abbreviate or contact and insert only one debtor name (1a or 1b) - do not abbreviate or contact and insert only one debtor name (1a or 1b) - do not abbreviate or contact and insert only one debtor name (1a or 1b) - do not abbreviate or contact and insert only one debtor name (1a or 1b) - do not abbreviate or contact and insert only one debtor name (1a or 1b) - do not abbreviate or contact and insert only one debtor name (1a or 1b) - do not abbreviate or contact and insert only one debtor name (1a or 1b) - do not abbreviate or contact and insert only one debtor name (1a or 1b) - do not abbreviate or contact and insert only one debtor name (1a or 1b) - do not abbreviate or contact and insert only one debtor name (1a or 1b) - do not abbreviate or contact and insert only one debtor name (1a or 1b) - do not abbreviate or contact and insert only one debtor name (1a or 1b) - do not abbreviate or contact and insert only one debtor name (1a or 1b) - do not abbreviate or contact and insert only one debtor name (1a or 1b) - do not abbreviate or contact and insert only one debtor name (1a or 1b) - do not abbreviate or contact and insert only one debtor name (1a or 1b) - do not abbreviate or contact and insert only one debtor name (1a or 1b) - do not abbreviate or contact and insert only one debtor name (1a or 1b) - do not abbreviate or contact and insert only one debtor name (1a or 1b) - do not abbreviate or contact and insert only one debtor name (1a or 1b) - do not abbreviate or contact



Doc#: 0815535039 Fee: \$38.00 Eugene "Gene" Moore RHSP Fee: \$10.00

Cook County Recorder of Deeds Date: 06/03/2008 09:39 AM Pg: 1 of 2

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

	THE AB	OVE SPACE IS FOR FILING OFFIC	E USE ONLY	
1. DEBTOR'S EXACT FULL LECALAL ME-insert only one debtor nar	ne (1a or 1b) - do not abbreviate or combine names			
1a. ORGANIZATION'S NAME				
OR 16. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
FREIVOGEL	WILLIAM		MR.	
1c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY	
999 N. LAKE SHORE DRIVE UNIT	IR CHICAGO	IL 60611	US	
1d. SEE INSTRUCTIONS ADD'L INFO RE 1e. TYPE OF ORGAN IZ	ATIC.N 1f. JURISDICTION OF ORGANIZATION	1g. ORGANIZATIONAL ID#,	1g. ORGANIZATIONAL ID #, if any	
ORGANIZATION DEBTOR			NONE	
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - inser	t only or a det for name (2a or 2b) - do not abbreviate o	r combine names		
2a. ORGANIZATION'S NAME	7			
OR 2b. INDIVIDUAL'S LAST NAME	FIRS. NAME	MIDDLE NAME	SUFFIX	
FREIVOGEL	CAROLINE		ļ	
2c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY	
999 N. LAKE SHORE DRIVE UNIT	1B CHICAGO	IL 60611	US	
2d. SEE INSTRUCTIONS ADD'L INFO RE 2e. TYPE OF ORGANIZ	ZATION 2f. JURISDICTION OF OI GA VIZATION	2f. JURISDICTION OF OF GA VIZATION 2g. ORGANIZATIONAL ID #, if any		
ORGANIZATION DEBTOR			NONE	
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASS	SIGNOR S/P) - insert only one secured party name (32	3b)		
3a. ORGANIZATION'S NAME		· 0.		
THE NORTHERN TRUST COMPAN	Y			
OR 36. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDOLE NAME	SUFFIX	
		0,		
3c. MAILING ADDRESS	CITY	STATE POST IL CODE	COUNTRY	
3000 LEADENHALL ROAD	MT. LAUREL	NJ \02054	US	

4. This FINANCING STATEMENT covers the following collateral:

ALL THE DEBTOR(S) RIGHT, TITLE AND INTEREST N AND TO 90 SHARES OF CAPITAL STOCK GO 199 LAKE SHROE DRIVE CORPORATION (THE SHARES) ALLOCATED TO APARTMENT 1B (THE "APARTMENT") IN THE BUILDING KNOWN AS 999 N. LAKE SHORE DRIVE, CHICAGO, IL 60611 AND ALL OF THE DEBTOR(S) RIGHT, TITLE AND INTEREST IN THAT CERTAIN PROPRIETARY LEASE BETWEEN 999 LAKE SHORE DRIVE CORPORATION AS LESSOR AND DEBTOR(S) AS LESSEE, THE LEASE. THIS FINANCING STATEMENT SHALL BE EFFECTIVE UNTIL TERMINATED.

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 FSTATE RECORDS. Attach Addendum [if applicable] [ADDITIONAL FEE] [optional] All Debtors Debtor 1 Debtor 2

8. OPTIONAL FILER REFERENCE DATA

(22/02) box 334.

0815535039 Page: 2 of 2

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LEGAL DESCRIPTION

ADDRESS: 999 N. LAKE SHORE DRIVE, APT 1B, CHICAGO, ILLINOIS

LOT 12 IN HOLBROOK AND SHEPARD'S SUBDIVISION OF PARTS OF BLOCK 8 IN CANAL TRUSTEES' SUBDIVISION OF THE SOUTH FRACTIONAL QUARTER OF SECTION 3, TOWNSHIP 39 NORTH , RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, ACCORDING TO THE PLAT THEREOF RECORDED FEBRUARY 24, 1912, AS DOCUMENT NUMBER 4918125, IN COOK COUNTY, ILLINOIS. 8-008-00.

COOK COUNTY CLOTH'S OFFICE

PIN #: 17-03 208-0000