## **NOFFICIAL COPY**

<u></u>		
HCC EINANCIN	IG STATEMENT	
	DNS (front and back) CAREFULLY	
A. NAME & PHONE OF	CONTACT AT FILER [optional]	
R. BRUCE P.	ATTERSON (217) 726-9100	
B. SEND ACKNOWLED	DGMENT TO: (Name and Address)	
R. BRUC	CE PATTERSON	'
PATTER	RSON & ASSOCIATES	
2401 WI	EST WHITE OAKS DRIVE	
SPRING	FFFLD, ILLINOIS 62704	1



Doc#: 0819231002 Fee: \$40.00 Eugene "Gene" Moore RHSP Fee:\$10.00

Cook County Recorder of Deeds

Date: 07/10/2008 09:32 AM Pg: 1 of 3

<u> </u>		THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY				
1 DEBTOR'S EXACT F	ULL ESTENAME	- insert only <u>one</u> debtor name (1a o	r 1b) - do not abbreviate or combine names			
12 ORGANIZATION'S NA	ME	<del></del>				
FIRST STEP	CHILL CA	RE CENTER, INC.				
OR 1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	MIDDLE NAME		
1c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY
22025 GOVE	D NIODIC LI	WV	RICHTON	IL	60471	USA
			1f. JURISDICTION OF ORGANIZATION	1	ANIZATIONAL ID #, if any	,
1d. TAX ID #: SSN OR EIN	ORGANIZATION	1e. TYPE OF ORCANIZATION	ILLINOIS	I	53303	NONE
	DEBTOR	CORPORATION	ILLINOIS	10000	1000	NONE
2. ADDITIONAL DEBTOR	R'S EXACT FULL	LEGAL NAME - insert only one le	btor name (2a or 2b) - do not abbreviate or com	bine names		
2a. ORGANIZATION'S NA	AME					
OR 2b. INDIVIDUAL'S LAST NAME		FIRSTNAME	MIDDLE	NAME	SUFFIX	
2c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY
			704			
2d. TAX ID#: SSN OR EIN	ADD'L INFO RE	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF OR JANIZATION	2g. ORG	ANIZATIONAL ID#, if any	y
2d. TAX ID #. GGIT ON LIT	ORGANIZATION			i		NONE
	DEBTOR	<u> </u>				LINONE
		of TOTAL ASSIGNEE of ASSIGNOR	S/P) - insert only one secured part, name /Ja o	r 3b)		
3a. ORGANIZATION'S N		r v Discovince A Di	AUNICED ATION			
UNITED STA	ATES SMA	LL BUSINESS AD		The part of		Tsuffix
OR 36. INDIVIDUAL'S LAST	NAME		FIRST NAME	MIDDLE	NAME	SUFFIX
				(7)		
3c, MAILING ADDRESS			CITY	STATE	OSTAL CODE	COUNTRY
2401 WEST	WHITE OA	KS DRIVE	SPRINGFIELD	IL	<sup>1</sup> 52.704	USA

4. This FINANCING STATEMENT covers the following collateral:

ALL EQUIPMENT NOW OWNED OR HEREAFTER ACQUIRED AND THE PROCEEDS THEREOF, WHEREVER LOCATED.

5. ALTERNATIVE DESIGNATION [if applicable]: LESSEE/LESSOR CONSIGNEE/CONSIGNOR BA	ILEE/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 1. [ADDITIONAL FEEL 1. [ADDITIONAL FEEL 1. ]	SEARCH REPORT(S) on Debtor(s) All Debtors Debtor 1 Debtor 2
8. OPTIONAL FILER REFERENCE DATA	
SBA LOAN NUMBER	

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UCC FINANCING STATE FOLLOW INSTRUCTIONS (front and ba	MENT ADDENDUM				
9. NAME OF FIRST DEBTOR (1a or 1	b) ON RELATED FINANCING STATE	MENT			
9a. ORGANIZATION'S NAME					
FIRST STEP CHILD (	CARE CENTER, INC.				
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX			
10.MISCELLANEOUS:					
2000	S <sub>A</sub> .		THE ABOVE SPACE	IS FOR FILING OFF	CE USE ONLY
11. ADDITIONAL DEBTOR'S EXACT	FULL 1 F GAL NAME - insert only one name	me (11a or 11b) - do not abbrevia	ate or combine names		
11a. ORGANIZATION'S NAME	TOLK ET ONE WHITE " HISTORY SILE WHI				
	Ox				
OR 11b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE		SUFFIX
11c. MAILING ADDRESS	00	CITY	STATE	POSTAL CODE	COUNTRY
11d. TAX ID # SSN OR EIN ADD'L INFO ORGANIZA' DEBTOR	7.0	11f. JURISDICTION OF ORGAN	IZATION 11g OR	GANIZATIONAL ID #, if a	NONE
12. ADDITIONAL SECURED PA	RTY'S or 🗶 ASSIGNOR S/P'S	NAME - invertionly one name	(12a or 12b)		
12a, ORGANIZATION'S NAME	GROWTH CORPORAT	ION			
OR 12b. INDIVIDUAL'S LAST NAME	3.00.111.001.0	FIRST NAME	MIDDLE	NAME	SUFFIX
		СПҮ	STATE	POSTAL CODE	COUNTRY
2401 WEST WHITE		SPRINGFIELD	IL	62704	USA
13. This FINANCING STATEMENT covers collateral, or is filed as a fixture filing fixture filing fixture filing fixture filing fixture filing fixture filing fixed f	timber to be cut or as-extracted	16. Additional collateral descri	ption:"		
SEE ATTACHED EX	HIBIT "A"		0,		
				10	
				9	
15. Name and address of a RECORD OWN (if Debtor does not have a record intere-					
FIRST STEP CHILD					
RESOURCE CENTER		17. Check only if applicable a	nd check <u>only</u> one box.	<u> </u>	
		Debtor is a Trust or	Trustee acting with respect to	property held in trust or	Decedent's Estate
22025 GOVERNOR'S	) I W I	18. Check only if applicable a			
RICHTON, IL 60471		Debtor is a TRANSMITTIN			
		I=	Manufactured-Home Transact Public-Finance Transaction —		
		Filed in connection with a	ruphe-rmance transaction —	Choone no years	

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## **UNOFFICIAL COPY**

WHEN RECORDED MAIL TO: R. Bruce Patterson 2401 West White Oaks Drive Springfield, Illinois 62704

## **EXHIBIT "A"**

LOT 4 (EXCEPT THE NORTH 173.50 FEET THEREOF) IN M. R. GARSKA'S RESUBDIVISION OF LOTS 19 AND 23 IN C. C. CLELK'S DIVISION OF THE WEST 1/2 OF THE SOUTHWEST 1/4 OF SECTION 26, TOWNSHIP 35 NORTH, RANGE 17 E AST OF THE THIRD PRINCIPAL MERIDIAN, RECORDED JUNE 8, 1977 AS DOCUMENT 23959605, ALL IN COOK COUNTY, ILLINOIS. 125 GOVE.

OF COUNTY CIEPA'S OFFICE

COMMONLY KNOWN AS: 12025 GOVERNORS HWY, RICHTON PARK, IL, 60471

PIN: 31-26-300-064-0000