JNOFFICIAL COP Doc#: 0912026009 Fee: \$38.00 **UCC FINANCING STATEMENT** Eugene "Gene" Moore RHSP Fee:\$10.00 FOLLOW INSTRUCTIONS (front and back) CAREFULLY Cook County Recorder of Deeds A. NAME & PHONE OF CONTACT AT FILER [optional] Date: 04/30/2009 08:45 AM Pg: 1 of 2 B. SEND ACKNOWLEDGMENT TO: (Name and Address) THE NORTHERN TRUST COMPANY 1 MORTGAGE WAY MT. LAUREL, NJ 08054 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1. DEBTOR'S EXACT FULL: FGP NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names 1a. ORGANIZATION'S NAME MIDDLE NAME SUFFIX 1b INDIVIDUAL'S LAST NAME FIRST NAME G **THOMAS ALAN** CITY STATE POSTAL CODE COUNTRY 1c. MAILING ADDRESS **USA** IL60637 5719 SOUTH KENWOOD AVENUE 5S **CHICAGO** 1g. ORGANIZATIONAL ID#, if any ADD'L INFO RE 1e. TYPE OF OR SANIZ/ TION 1f. JURISDICTION OF ORGANIZATION 1d. SEE INSTRUCTIONS ORGANIZATION NONE DEBTOR 2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert on / one de' tor name (2a or 2b) - do not abbreviate or combine names 2a. ORGANIZATION'S NAME OR 2b. INDIVIDUAL'S LAST NAME MIDDLE NAME SUFFIX F RST NAME JULIA Α THOMAS STATE POSTAL CODE COUNTRY 2c. MAILING ADDRESS CITY 60637 USA CHICAGO IL5719 SOUTH KENWOOD AVENUE 5S ADD'L INFO RE 2e. TYPE OF ORGANIZATION ORGANIZATION 2g. ORGANIZATIONAL ID #, if any 2f. JURISDICTION O. OF GANIZATION 2d. SEEINSTRUCTIONS NONE DEBTOR

4. This FINANCING STATEMENT covers the following collateral:

1 MORTGAGE WAY

THE NORTHERN TRUST COMPANY

3a. ORGANIZATION'S NAME

3b. INDIVIDUAL'S LAST NAME

3c. MAILING ADDRESS

ALL OF THE DEBTOR(S) RIGHT, TITLE AND INTEREST IN AND TO 167 SHARES OF CAPITAL STOCK OF RUSKIN APARTMENTS, INC. (THE SHARES) ALLOCATED TO APARTMENT 5S (THE APARTMENT) IN THE BUILDING KNOWN AS 5719 SOUTH KENWOOD AVENUE, CHICAGO, ILLINOIS 60637

MT LAUREL

FIRST NAME

AND ALL OF THE DEBTOR(S) RIGHT, TITLE AND INTEREST IN THE CERTAIN PROPRIETARY LEASE BETWEEN RUSKIN APARTMENTS INC, 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 |
| | | UEST SEARCH REPO | PT/S) on Dobtor(s) | | |
| 6. This FINANCING STATEMENT is to be filed [for record] (or recorded) | If applicable IADDITIONAL | | foptional) | All Debtors | Debtor 1 Debtor 2 |
| ESTATE RECORDS. Attach Addendum | III applicable] I IADDITIONAL | <u> </u> | Гориония | | |
| A ODTIONAL EILED DECEDENCE DATA | | | | | |

B0+334

SUFFIX

COUNTRY

USA

MIDDLE NAME

OSTAL CODE

02054

STAT

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name ("ac 3b)

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STREET ADDRESS: 5715-9 SOUTH RENWOOD CIAL COPY

COUNTY: COOK CITY: CHICAGO

TAX NUMBER: 20-14-216-002-0000

LEGAL DESCRIPTION:

THE SOUTH 60.00 FEET OF LOT 1 (EXCEPT THE EAST 37 FEET 10 INCHES THEREOF) AND ALL OF LOT 2 IN WALTER C. NELSON'S SUBDIVISION OF LOTS 16 TO 24, INCLUSIVE; WITH PART OF VACATED ALLEY, LYING EAST OF AND ADJOINING SAID LOTS IN BLOCK 69 IN HOPKINS ADDITION TO HYDE PARK IN THE WEST 1/2 OF THE NORTHEAST 1/4 OF SECTION 14, TOWNSHIP 38 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

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