UNOFFICIAL COPY

UCC FINANCING STATEMENT AMEN FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] Anita Harney, 734-459-8825 B. SEND ACKNOWLEDGMENT TO: (Name and Address) National City Bank Construction Loans 50-RF32-B7 535 S Main Street Plymouth, MI 48170	DMENT	Eugene "Ge Cook Coun	913219018 Fee: \$ ene" Moore RHSP Fee ty Recorder of Deeds 72009 09:13 AM Pg:	:\$10.00
1a. INITIAL FINANCING STATEMENT FILE #		THE ABOV	E SPACE IS FOR FILING	OFFICE USE ONLY
MMTC RESIDENTIAL I. LI C (Document #07	14133220)	-	1b. This FINANCING STA	TEMENT AMENDMENT is
2. TERMINATION: Effectiveness of the Financing Statement Identified a	above is terminated with respe	ct to security interest(s) of the	REAL ESTATE REC	ORDS.
3. CONTINUATION: Effectiveness of the Fina sting Statement identified continued for the additional period provided by applicable law.	dabove with respect to security	interest(s) of the Secured Par	ty authorizing this Continuation	Statement is
ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7i				oddonion is
5. AMENDMENT (PARTY INFORMATION): This Amendment affects De Also check one of the following three boxes and provide appropriate into mate CHANGE name and/or address: Give current record name in item care name (if name change) in item 7a or 7b and/or new address (if address.)	ebtor or Secured Party of r ton in items 6 and/or 7. Toboralso give new	ecord. Check only <u>one</u> of these	e two boxes.	lete item 7a or 7b, and also item
6. CURRENT RECORD INFORMATION:	cns lot i in item /c. be	deleted in item 6a or 6b.	7c; also complete	items 7d-7g (if applicable)
6a. ORGANIZATION'S NAME				
OR 66 INDIVIDUAL'S LAST NAME	FIRST N. MF		MIDDLE NAME	SUFFIX
7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME) <u>X</u> .		
201				
7b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE NAME	SUFFIX
7c. MAILING ADDRESS	CITY	(Q)	STATE POSTAL COD	E COUNTRY
7d. TAX ID #: SSN OR EIN ADDL INFO RE ORGANIZATION ORGANIZATION DEBTOR ADDL INFO RE ORGANIZATION ORGA	ON 7f. JURISDICTION OF	ORGANIZATION	7g. ORGANIZATIONAL ID#,	USA if any
8. AMENDMENT (COLLATERAL CHANGE): check only one box.			<u>r</u>	NONE
Describe collateral Added or added, or give entire restated collapse.		•	0,5	
DESCRIPTION: UNIT #205 ONLY, LOT 2 OF OAK 0630717112, BEING A RESUBDIVISION OF PA MINNICK'S OAK LAWN IN THE NORTHWEST 1 THIRD PRINCIPAL MERIDIAN, IN COOK COUN P.I.N.: 24-09-107-016-0000, 24-09-107-017-0000	1/4 OF SECTION S NTY, ILLINOIS	OF OAK LAWN A 9, TOWNSHIP 37	ND PART OF BLO NORTH, RANGE 1	-
ANAME OF SECURED PARTY OF RECORD AUTHORIZING THIS A adds collateral or adds the authorizing Debtor, or if this is a Termination a Sa. ORGANIZATION'S NAME National City Bank, a National Banking As Sec. INDIVIDUAL'S LAST NAME	authorized by a Debtor, chec	signor, if this is an Assignme k here and enter name	ent). If this is an Amendment a of DEBTOR authorizing this A MIDDLE NAME	Amendment.
			THE PARTY OF THE P	SUFFIX 54
0. OPTIONAL FILER REFERENCE DATA				ms
ACKNOWLEDGMENT COPY - NATIONAL UCC FINANCING STATE	MENT AMENDMENT (FC	RM UCC3) (REV: 07/29/9	98)	