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	E	Ooc#: 1208034071 Fedugene "Gene" Moore RHSP took County Recorder of Dec	Fee:\$10.00
UCC FINANCING STATEMENT AMENDMI	5	ate: 03/20/2012 03:19 PM F	
A. NAME & PHONE OF CONTACT AT FILER [optional]			
B. SEND ACKNOWLEDGMENT TO: (Name and Address)			
Return acknowledgment to:	7		
Return acknowledgment to.			
Lap tol Services, Inc. P.O. Box 1831 Austin, TX 78767	Ì		
500/345-4647			
L 70	THE ABO	VE SPACE IS FOR FILING OFFICE USE	ONLY
1a. INITIAL FINANCING STATEMENT FILE # 00U12608 BOOK 38, PAGE 1 (ORI'JIN ALLY FILED)	NOVEMBER 30, 2000)	1b. This Financing Stateme to be filed [for record] (or nestate records.	
2. X TERMINATION: Effectiveness of the Financing steament identified a	above is terminated with respect to security interest(s	s) of the Secured Party authorizing this Term	nnation Statement.
 CONTINUATION: Effectiveness of the Financing Str. em. nt identificantinued for the additional period provided by application. 	Red above with respect to security interest(s) of the	e Secured Party authorizing this Continua	ation Statement is
4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or το	a, 1 address of assignee in item 7c; and also give n	ame of assignor in item 9.	
AMENDMENT (PARTY INFORMATION): This Amendment affect. C Also check one of the following three boxes and provide appropriate informal CHANGE name and/or address: Please refer to the detailed instructions in rithe name/address of a party. G. CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME	tir n in ems 6 and/or 7.		
OR 6b. INDIVIDUAL'S LAST NAME.	FIRST NAME	MIDDLE NAME	SUFFIX
GD. INDIVIDUAL'S LAST NAME.	FIRST NAME	MIDDLE NAME	SUFFIX
GD. INDIVIDUAL'S LAST NAME.	FIRST NAME	MIDDLE NAME	SUFFIX
6b. INDIVIDUAL'S LAST NAME 7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME OR	7		
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6b. INDIVIDUAL'S LAST NAME 7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME OR 7b. INDIVIDUAL'S LAST NAME 7c. MAILING ADDRESS 7d. SEE INSTRUCTIONS ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR 8. AMENDMENT (COLLATERAL CHANGE): check only one box Describe colleteral deleted or added, or give entire restated	FIRST NAME CITY 7f. JURISDICTION OF ORGANIZATION collateral description, or describe collateral self-self-self-self-self-self-self-self-	MIDDLE NAME 7g. Of GANIZATIONAL ID#, if an assigned.	SUFFIX COUNTRY NONE
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7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME OR 7b. INDIVIDUAL'S LAST NAME 7c. MAILING ADDRESS 7d. SEE INSTRUCTIONS ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR 8. AMENDMENT (COLLATERAL CHANGE): check only one box Describe collateral deleted or added, or give entire restated restated adds or give entire restated eleted or added or give entire restated eleted or added or give entire restated eleted or organization or give entire organization organiz	FIRST NAME CITY 7f. JURISDICTION OF ORGANIZATION collateral description, or describe collateral and an an assignment of the second of the	MIDDLE NAME 7g. O'. GANIZATIONAL ID #, if all assigned. assigned. fithis is an Amendment authorized to DEBTOR authorizing this Amendment.	SUFFIX COUNTRY NONE
6b. INDIVIDUAL'S LAST NAME 7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME 7c. MAILING ADDRESS 7d. SEE INSTRUCTIONS ADD'L INFO RE ORGANIZATION ORGANIZATION DEBTOR 8. AMENDMENT (COLLATERAL CHANGE): check only one box Describe collateral deleted or added, or give entire restated 9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS A adds collateral or edds the authorizing Debtor, or if this is a Termination authority 9a. ORGANIZATION'S NAME FANNIE MAE AND BANK ONE NATIONAL A	FIRST NAME CITY 7f. JURISDICTION OF ORGANIZATION collateral description, or describe collateral and a second and a sec	MIDDLE NAME 7g. Of GANIZATIONAL ID #, if all assigned. assigned.	SUFFIX COUNTRY

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UC	C FINANCING STATE	MENT AMENDME	NT ADDENDUM		
FOL	LOW INSTRUCTIONS (front and bar	ck) CAREFULLY			
11.1	NITIAL FINANCING STATEMENT F	ILE # (same as item 1a on Amer	ndment form)		
00	U12608 BOOK 38, PAGE 1	(ORIGINALLY FIL	ED 11/30/2000)		
12.	NAME OF PARTY AUTHORIZING	THIS AMENDMENT (same as i	tem 9 on Amendment form)		
	12a. ORGANIZATION'S NAME				
	FANNIE MAE AND BANK ONE NATIONAL ASSOCIATION*				
OR	12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX		
13.	Use this space for additional informs	ation			

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

*FANNIE MAE AND & INK ONE NATIONAL ASSOCIATION AS THEIR INTERST MAY APPEAR

Parcel 1: The northerly 1/2 of Lot 10 and the easterly 25 feet of the northerly 1/2 of Lot 30 in Block 18 in Hyde Park in Sections 11, 12 and 14 Towns ii 38 North, Range 14 East of the third principal Meridian in Cook County, Illinois.

Parcel 2: The southerly 25 feet of Lot 7, 'll' of Lots 8 and 9 and the easterly 25 feet of Lots 31 and 32 in Block 18 in Hyde park in Section 12, Township 38 North. Pange 14 East of the third principal Meridian in Cook County, Illinois.

PIN 20-12-108-042-0000

Physical Address: 5140 S. Hyde Park Blvd., Chicago, V. 60615

Debtor: Park Tower Limited Partnership, c/o AIMCO, 4582 S. Ulster St. Pkwy, Denver, CO 80237

Secured Party: Fannie Mae, 3900 Wisconsin Ave. NW, Washington D.C. 20016
Bank One National Association, 2 North LaSalle Struct, Suite 1020, Chicago, IL 60602