## **UNOFFICIAL COPY**

	CC FINANCING STATEMENT AMENDM OLLOW INSTRUCTIONS (front and back) CAREFULLY	ENT			222017054	
$\overline{}$	NAME & PHONE OF CONTACT AT FILER [optional]	318) 662-4141			222017054 Fe	
Ŀ		<u> </u>		•	erie Moore Ansr ity Recorder of De	
5.	SEND ACKNOWLEDGEMENT TO: (Name and Mailing Address) 15715 Ban	k Financiai	Da	ate: 08/0	7/2012 01:45 PM	Pg: 1 of 3
l	0.400					
l	CT Lien Solutions 34205	0/32				
	P.O. Box 29071					
l	Glendale, CA 91209-9071					
			THE ABOV	E SPACE I	S FOR FILING OFFICE U	SE ONLY
1a.	0722917092 08/17/07 CC IL Cook			lo b	FINANCING STATEMEN e filed [for record] (or reco AL ESTATE RECORDS.	
2.	TERMINATION: Effectiveness of the Financing Statement identified at					
3.	[X] CONTINUATION: Effectiveness of the Financing Statement identified at continued for the additional period provided by applicable faw.	pove with respect to the	security interest(s) of the Securi	ed Party aut	horizing this Continuation	Statement is
4.	ASSIGNMENT (full or partial): Give name of assigr ee it it in 7a or	7h and address of a	essionee in 7c; and also give	name of a	ssignor in item 9	
5. /	AMENDMENT (PARTY INFORMATION): This Amendment affects		red Party of record. Check only o			
	Also check one of the following three boxes and provide appror late it.  CHANGE name and/or address: Give current record name in item 6a > 6b  name (if name change) in item 7a or 7b and/or new address (if address of an	t'so give new	and/or 7. DELETE name: Give record nar to be deleted in item 6a or 6b.	1 1	ADD name: Complete iten tem 7c; also complete iter	
6. 0	CURRENT RECORD INFORMATION:  [6a. ORGANIZATION'S NAME	9				
OR	6b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE N	ANE	LOUERN
	HODGES	DEWEY	,	A.	AME	SUFFIX
7. 0	CHANGED (NEW) OR ADDED INFORMATION:			, ··		
	7a. ORGANIZATION'S NAME		-///	<del></del> -	<del></del>	<del></del>
OR	75 INOVIDUALIO LACENAME					
	7b. INDIVIDUAL'S LAST NAME	FIRST NAME	(/	MIDDLE N	AME	SUFFIX
7c. I	MAILING ADDRESS	спу	(0)	STATE	POSTAL CODE	COUNTRY
7d. §	SEE INSTRUCTION ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR	7f. JURISDICTION	OF ORGANIZATION	7g. OF G) I	NIZATIONAL, ID #, if any	NONE
	MENDMENT (COLLATERAL CHANGE): check only one_box.	<del></del>	<del></del>		U.C.	
1	Describe collateral deleted or added, or give entire restated coll	ateral description, or	describe collateral assigne	d.	150	S_X_
					.0	P 3
					C	
						5_1/
						M
						SC
						<u> </u>
). N/	AME OF SECURED PARTY OF RECORD AUTHORIZING THIS ANSWER	DMENT				N 46
e [	AME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENI	DIVIEN I (name of assi by a Debtor, check he	gnor, if this is an Assignment). If e and enter name of DEBTO	this is an Ai DR authorizi	nendment authorized by a	a Debtor which
_ [	BANKFINANCIAL, F.S.B.	.,			·•····································	
)R	9b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE NA	ME	SUFFIX

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11.	INITIAL FINANCING STATEMENT F	ILE # (same as item 1a on Amen	dment form)		
07	22917092 08/17/07	CC IL Cook			
12. 1	NAME of PARTY AUTHORIZING THIS AN	ENDMENT (same as item 9 on Ame	ndment form)		
	BANKFINANCIAL, F.S.B.				
OR	12b. JNDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX		

JORE 15W060 1

OPCOOK COUNTY CIENTS OFFICE HODGES, CYNTHIA J. - 20139 OREGON TRAIL, OLYMPIA FIELDS, IL

60461 SP: BANKFINANCIAL, F.S.B.: 15W060 NORTH FRONTAGE ROAD, BURR RIDGE, IL 60527

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# UNOFFICIAL COPY

#### EXHIBIT A

**BORROWER: DEWEY A. AND CYNTHIA J. HODGES** 

LOAN NO.: 1902027127

PROPERTY ADDRESS: 4111 LINDENWOOD DR., MATTESON, IL 60443

PIN #: 31-22-207-017-0000

#### LEGAL DESCRIPTION:

LOT 68 IN T IF RESUBDIVISION OF LOTS 5 TQ.7 IN MATTESON
HIGHLANDS UNIT NUMBER 1 BEING A SUBDIVISION OF THE SOUTH 1850
FEET OF THE NOP. THEAST 1/4 OF SECTION 22, TOWNSHIP 35 NORTH,
RANGE 13 EAST OF THE THIRD PRINCIPAL MERIDIAN (EXCEPT THE
SOUTH 250 FEET OF THE EAST 475 FEET AND EXCEPT MATTESON
HIGHLANDS SUBDIVISION AS PER PLAT THEREOF RECORDED JULY 6,
1962 AS DOCUMENT 18525520) IN COOK COUNTY, ILLINOIS.