

# UNOFFICIAL COPY



Doc#: 1234531099 Fee: \$42.00  
Karen A. Yarbrough RHSP Fee: \$10.00  
Cook County Recorder of Deeds  
Date: 12/10/2012 04:39 PM Pg: 1 of 3

## UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A NAME & PHONE OF CONTACT AT FILER [optional]

B SEND ACKNOWLEDGMENT TO: (Name and Address)

Apex Mortgage Corp.  
1300 Virginia Drive  
Suite 400  
Fort Washington, PA 19034

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1 DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a ORGANIZATION'S NAME

OR 1b INDIVIDUAL'S LAST NAME: FRANKLIN

FIRST NAME: ULYSSES

MIDDLE NAME

SUFFIX

1c MAILING ADDRESS: 481-485 BUFFALO AVENUE/723-725

CITY: CALUMET CITY

STATE: IL

POSTAL CODE: 60409

COUNTRY: USA

1d SEE INSTRUCTIONS

ADD'L INFO RE ORGANIZATION DEBTOR

1e TYPE OF ORGANIZATION: INDIVIDUAL

1f JURISDICTION OF ORGANIZATION

1g ORGANIZATIONAL ID # if any

NONE

2 ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a ORGANIZATION'S NAME

OR 2b INDIVIDUAL'S LAST NAME: FRANKLIN

FIRST NAME: GEORGIA

MIDDLE NAME

SUFFIX

2c MAILING ADDRESS: 481-485 BUFFALO AVENUE/723-725

CITY: CALUMET CITY

STATE: IL

POSTAL CODE: 60409

COUNTRY: USA

2d SEE INSTRUCTIONS

ADD'L INFO RE ORGANIZATION DEBTOR

2e TYPE OF ORGANIZATION: INDIVIDUAL

2f JURISDICTION OF ORGANIZATION

2g ORGANIZATIONAL ID # if any

NONE

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

3a ORGANIZATION'S NAME: APEX MORTGAGE CORP.

OR 3b INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

3c MAILING ADDRESS: 1300 VIRGINIA DRIVE, SUITE 400

CITY: FORT WASHINGTON

STATE: PA

POSTAL CODE: 19034

COUNTRY: USA

4 This FINANCING STATEMENT covers the following collateral:

All Inventory, Chattel Paper, Accounts, Equipment, Furniture, Machinery, General Intangibles and Fixtures; whether any of the foregoing is owned now or acquired later; all accessions, additions, replacements, and substitutions relating to any of the foregoing; all records of any kind relating to any of the foregoing; all proceeds relating to any of the foregoing (including insurance, general intangibles and other accounts proceeds).

FIDELITY NATIONAL TITLE 52004780

1081

5. ALTERNATIVE DESIGNATION (if applicable): LESSEE/LESSOR  CONSIGNEE/CONSIGNOR  BAILEE/BAILOR  SELLER/BUYER  AG. LIEN  NON-UCC FILING

6  This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum if applicable.

7 Check to REQUEST SEARCH REPORT(S) on Debtor(s) (OPTIONAL FEE)

All Debtors  Debtor 1  Debtor 2

8 OPTIONAL FILER REFERENCE DATA

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## UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

**9 NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT**

9a ORGANIZATION'S NAME

OR

9b INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME SUFFIX

FRANKLIN

ULYSSES

10 MISCELLANEOUS:

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

**11 ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (11a or 11b) - do not abbreviate or combine names**

11a ORGANIZATION'S NAME

OR

11b INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

11c MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

11d **SEE INSTRUCTIONS**

ADD'L INFO RE ORGANIZATION DEBTOR

11a TYPE OF ORGANIZATION

11b JURISDICTION OF ORGANIZATION

11g ORGANIZATIONAL ID #, if any

NONE

**12 ADDITIONAL SECURED PARTY'S or ASSIGNOR S/P'S NAME - insert only one name (12a or 12b)**

12a ORGANIZATION'S NAME

OR

12b INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

12c MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

13 This FINANCING STATEMENT covers  timber to be cut or  as-extracted collateral or is filed as a  fixture filing

14 Description of real estate:

481-486 Buffalo Avenue/723-725 Sibley Boulevard  
Calumet City, IL 60409.

16 Additional collateral description:

15 Name and address of a RECORD OWNER of above-described real estate (if Debtor does not have a record interest)

17 Check only if applicable and check only one box.

Debtor is a  Trust or  Trustee acting with respect to property held in trust or  Decedent's Estate

18 Check only if applicable and check only one box.

Debtor is a TRANSMITTING UTILITY

Filed in connection with a Manufactured-Home Transaction

Filed in connection with a Public-Finance Transaction

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## FIDELITY NATIONAL TITLE INSURANCE COMPANY



203 N. LASALLE #2200, CHICAGO, ILLINOIS 60601

PHONE: (312) 621-5000

FAX: (312) 621-5033

ORDER NUMBER: 2011 052004780 UOC  
STREET ADDRESS: 481-485 AVE./723-725 SIBLEY BLVD.

CITY: CALUMET CITY  
TAX NUMBER: 30-07-405-034-0000

COUNTY: COOK

**LEGAL DESCRIPTION:**

LOTS 1 AND 2 IN BLOCK 21 IN FORD CALUMET HIGHLANDS ADDITION TO WEST HAMMOND, A SUBDIVISION OF THE EAST 1316 FEET OF THE NORTH 1/2 OF THE SOUTHEAST 1/4 OF SECTION 7, TOWNSHIP 36 NORTH, RANGE 15, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Property of Cook County Clerk's Office