

# UNOFFICIAL COPY



## UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

Doc#: 1402129030 Fee: \$40.00  
RHSP Fee:\$9.00 RPRF Fee: \$1.00  
Karen A.Yarbrough  
Cook County Recorder of Deeds  
Date: 01/21/2014 11:32 AM Pg: 1 of 2

A. NAME & PHONE OF CONTACT AT FILER (optional) <b>WORLD FUEL SERVICES DBA TEXOR PETROLEUM</b>
B. E-MAIL CONTACT AT FILER (optional) <b>kelly.allen@carterenergy.com</b>
C. SEND ACKNOWLEDGMENT TO: (Name and Address) <b>WORLD FUEL SERVICES DBA TEXOR PETROLEUM P.O. BOX 29106 SHAWNEE MISSION KS 66201 913-643-2247</b>

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here  and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME <b>CALUMET PARK CITGO INC.</b>					
OR	1b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS <b>12658 S WOOD ST</b>		CITY <b>CALUMET PARK</b>	STATE <b>IL</b>	POSTAL CODE <b>60827</b>	COUNTRY <b>USA</b>

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here  and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME					
OR	2b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY

3. SECURED PARTY'S NAME (or NAME OF ASSIGNEE OF ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME <b>WORLD FUEL SERVICES DBA TEXOR PETROLEUM</b>					
OR	3b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS <b>P.O. BOX 29106</b>		CITY <b>SHAWNEE MISSION</b>	STATE <b>KS</b>	POSTAL CODE <b>66201</b>	COUNTRY <b>USA</b>

4. COLLATERAL: This financing statement covers the following collateral:

**THREE(3) GASOLINE DISPENSERS TOKHEIM BRAND  
ONE(1)CITGO BRANDED CANOPY  
TWO(2)RUBY POS REGISTER CONSOLE  
WALK IN COOLER  
ONE(1)CITGO BRANDED 3 PRODUCT LED SIGN  
ONE(1)GASOLINE/DIESEL /KEROSENE(1) DISPENSER GILBARCO BRAND  
ALL FIXTURES  
ALL INVENTORY  
ALL PERSONAL PROPERTY  
PIN#25-30-416-050-0000**

3 Yes  
2  
3 NO  
1 NO  
30 YES  
E Yes  
INTLW

5. Check only if applicable and check only one box: Collateral is  held in a Trust (see UCC1Ad, item 17 and Instructions)  being administered by a Decedent's Personal Representative

6a. Check only if applicable and check only one box:  
 Public-Finance Transaction  Manufactured-Home Transaction  A Debtor is a Transmitting Utility

6b. Check only if applicable and check only one box:  
 Agricultural Lien  Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable):  Lessee/Lessor  Consignee/Consignor  Seller/Buyer  Bailee/Bailor  Licensee/Licenser

8. OPTIONAL FILER REFERENCE DATA:  
**CALUMET PARK CITGO INC.**

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## UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here

9a. ORGANIZATION'S NAME

**CALUMET PARK CITGO INC.**

OR 9b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c

10a. ORGANIZATION'S NAME

OR 10b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

10c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

11.  ADDITIONAL SECURED PARTY'S NAME or  ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

11a. ORGANIZATION'S NAME

OR 11b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

11c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):

13.  This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)

15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):

**CALUMET PARK CITGO INC.  
12658 S WOOD ST  
CALUMET PARK, IL 60827**

14. This FINANCING STATEMENT:

 covers timber to be cut covers as-extracted collateral is filed as a fixture filing

16. Description of real estate:

**LOTS 19 TO 22 AND THE EAST 15 FEET OF LOT 23 IN BLOCK 11 IN BLUE ISLAND PARK ADDITION, A SUBDIVISION OF THE EAST 1/2 OF THE WEST 1/2 AND THE WEST 1/2 OF THE WEST 1/2 OF THE EAST 1/2 OF THE SOUTHEAST 1/4 OF SECTION 30 TOWNSHIP 37 NORTH, RANGE 14 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS. PIN# 25-30-419-050-0000**

17. MISCELLANEOUS: