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JCC FINANCIN			2005 0				
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	8 Phase	V, Inc.					
1bUNDIVIDUAL'S LAST NAME		FIRST NAME	-	MIDDLE	NAME	SUFFIX	
COMAILING ADDRESS		Indianapolis		STATE	POSTAL CODE 46250	COUNTRY	
7202 N C	nadoland					40230	
		1eCTYPE OF ORGANIZATION	11culurisdiction of organization	ON 1		UNIZATIONAL ID #, if any	X NONE
OTAX ID #: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR DR'S EXACT FULL	1ectype of organization not-for-prof	1fcJURISDICTION OF ORGANIZATI	n IN	lg©RG/	NIZATIONAL ID #, if any	
ADDITIONAL DEBTO 28(DRGANIZATION'S N	ADD'L INFO RE ORGANIZATION DEBTOR DR'S EXACT FULL NAME	1ectype of organization not-for-prof	11 corporation	ON 1	lg©RG/		
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All personal property and chattels located on the real estate described on attached Exhibit A, and all additions and accessions thereto and all replacements and renewals thereof and proceeds of insurance and court claims.

	ONSIGNEE/CONSIGNOR BAILEE/BAILOR	SELLER/BUYER	AGILIEN NON-UCC FILING
60 This FINANCING STATEMENT is to be filed [for record] (or recorded) in the ESTATE RECORDSD Attach Addendum	REAL 7 Check to REQUEST SEARCH REPORT policable IADDITIONAL FEE	RT(S) on Debtor(s)	All Debtors Debtor 1 Debtor 2
800PTIONAL FILER REFERENCE DATA		and the same of all born but	NO CAN TITLE OOF

UCC FINANCING STATEMENT ADDENDUM

State Form 50181 (5-01)

Approved by State Board of Accounts, 2001

FOLLOW INSTRUCTIONS (FRONT AND BACK) CAREFULLY.	
9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT	
On ORGANIZATIONES NAME	_

9a. ORGANIZATION'S NAME

Pab. INDIVIDUAL'S LAST NAME

10. MISCELLANEOUS

FILED FOR RECORD

2005 JAN 6 ANN 880WN

	THE ABOVE	SPACE IS I	FOR FILING OFFI	CE USE ONLY	
11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - Insert only one del	btor (11a or 11b) - do not abbreviate or combine name	es			
11a. ORGANIZATION'S NAME					
AHEPA 78 Phase V, Inc.		5			
11b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME		SUFFIX	
11c. MAILING ADDRESS	CITY		POSTAL CODE	COUNTRY	
P.O. Box 11052	Merrillville	IN	46411	USA	
ADD'L INFO RE 11e. TYPE OF ORGANIZATION	11f. JURISDICTION OF ORGANIZATION	11g. ORG	11g. ORGANIZATIONAL ID #, if any		
ORGANIZATION Corporation	IN			☑ NONE	
12. ADDITIONAL SECURED PARTY'S OF ASSIGNOR S/P'S NAME -	insert only one secured party name (12a or 12b)				
12a. ORGANIZATION'S NAME					
OR					
12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	MIDDLE NAME		
12c. MAILING ADDRESS	CITY	STATE F	POSTAL CODE	COUNTRY	
13. This FINANCING STATEMENT covers T timber to be cut	16. Additional collateral description:				
as-extracted collateral, or as a fixture filing.					
14. Description of real estate:					
,					
See Attached Exhibit A					
5 None and address of DECOOR CHAPER Colors in the color					
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.				
(ii Debiol does not have a record interest).					
	Debtor is a Trust or Trustee acting with re	espect to prop	erty held in trust or	Decedent's Estat	
	18. Check only if applicable and check only of	one box.			
	Debtor is a TRANSMITTING UTILITY				
	☐ Filed in connection with a Manufactured			ears ,	
	Filed in connection with a Public-Finance	e Transaction	n - effective 30 years		

LEGAL DESCRIPTION,

Lot 4B, in AHEPA 78 Phase IV, Resubdivision, as recorded in Plat Book 93, Page 10, in the Office of the Recorder of Lake County, Indiana.

2005 0000

2005 JAW - 6 1 111: 30