

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2005 JAN -6 PM 1:45

MICHAEL A BROWN  
RECORDER

**INFORMATION REQUEST**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

2005-000012

A. NAME & PHONE OF CONTACT (optional)

B. RETURN TO: (Name and Address)

Precise Title, LLC  
8917 24th Street  
DeMotte, INDIANA 46310

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR NAME to be searched - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME

OR

1b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

Reichert Kevin L.

2. INFORMATION OPTIONS relating to UCC filings and other notices on file in the filing office that include as a Debtor name the name identified in Item 1:

2a. SEARCH RESPONSE  CERTIFIED (Optional)

Select one of the following two options:  ALL (Check this box to request a response that is complete, including filings that have lapsed.)  UNLAPSED

2b. COPY REQUEST  CERTIFIED (Optional)

Select one of the following two options:  ALL  UNLAPSED

2c. SPECIFIED COPIES ONLY  CERTIFIED (Optional)

Record Number	Date Record Filed (if required)	Type of Record and Additional Identifying Information (if required)
2001000773	3-30-01	ucc 1
97002146	6-11-97	ucc 1
99001865	6-15-99	ucc 1
200300021	2-26-03	ucc Amendment
2003000329	3-28-03	ucc Amendment
2001001480	6-7-01	ucc 1
2000000595	3-2-00	ucc 1

3. ADDITIONAL SERVICES: 2002 000160 1-29-02 Financing Statement

*John* 1-5-05

4. DELIVERY INSTRUCTIONS (request will be completed and mailed to the address shown in Item B unless otherwise instructed here):

4a.  Pick Up

4b.  Other

Specify desired method here if available from this office, provide delivery information (e.g., delivery method, name, address, e-mail, delivery address, telephone number, etc.)

FILING OFFICE COPY (1) — NATIONAL INFORMATION REQUEST (FORM UCC11) (REV. 05/02/01)