2005 000045





SUFFIX

COUNTRY

NONE

## 2005 JAN 20 PM 2: 19 UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY MICHAEL A PROWN A. NAME & PHONE OF CONTACT AT FILER [optional] B. SEND ACKNOWLEDGMENT TO: (Name and Address) Nancy Smerz Air Comfort Corporation 2550 Braga Drive Broadview, IL 601535 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1a. INITIAL FINANCING STATEMENT FILE # 1b. This FINANCING STATEMENT AMENDMENT is 94000994 Date:03/24/1994 to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. 2. X TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law. 4. ASSIGNMENT (tull or partial): Give name of assignee in item 7a or 7b and address of assignee in item 7c; and also give name of assignor in item 9. 5. AMENDMENT (PARTY INFORMATION): This Amendment affects Debtor of Secured Party of record. Check only one of these two boxes. Also check one of the following three boxes and provide appropriate information in items 6 and/or 7. CHANGE name and/or address: Please refer to the detailed instructions in regards to changing the name/address of a party. ADD name: Complete item 7a or 7b, and also item 7c; also complete items 7e-7g (if applicable). 6. CURRENT RECORD INFORMATION: 6a, ORGANIZATION'S NAME OR 6b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX 7. CHANGED (NEW) OR ADDED INFORMATION:

FIRST NAME

7f. JURISDICTION OF ORGANIZATION

CITY

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here and enter name of DEBTOR authorizing this Amendment.				
	9a ORGANIZATION'S NAME Mutual Trust Life Insurance Company			
OR	9ь. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

10 OPTIONAL FILER REFERENCE DATA

IN-Lake County Recorder

7a. ORGANIZATION'S NAME

7b. INDIVIDUAL'S LAST NAME

7c. MAILING ADDRESS

7d. SEEINSTRUCTIONS

Debtor: ⊠ACC Industries, Incorporated a Dela

MIDDLE NAME

STATE POSTAL CODE

7g. ORGANIZATIONAL ID#, if any

ADD'L INFO RE 76. TYPE OF ORGANIZATION

Describe collateral deleted or added, or give entire restated collateral description, or describe collateral assigned.

ORGANIZATION DEBTOR

8. AMENDMENT (COLLATERAL CHANGE): check only one box.