13/21/00 dir 8082000 004224 2005 000145 UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] JOYCE BRUNO (773)380-7310 X-109 B. SEND ACKNOWLEDGMENT TO: (Name and Address) CASTLE CREDIT CORPORATION 8420 W. BRYN MAWR SUITE 300 CHICAGO, IL 60631 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 16. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX **ASPROS** PETER COUNTRY POSTAL CODE STATE 2727 CLAY STREET LAKE STATION IN 46405 ADD'L INFO RE 1e. TYPE OF ORGANIZATION 1g. ORGANIZATIONAL ID #, if any 1d. SEE INSTRUCTIONS 1f. JURISDICTION OF ORGANIZATION ORGANIZATION DEBTOR 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 26. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX STOVER CRYSTAL 2c. MAILING ADDRESS STATE POSTAL CODE COUNTRY 46405 2727 CLAY STREET LAKE STATION IN ADD'L INFO RE 2e. TYPE OF ORGANIZATION ORGANIZATION 2f. JURISDICTION OF ORGANIZATION 2d. SEEINSTRUCTIONS 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 CASTLE CREDIT CORPORATION FIRST NAME MIDDLE NAME SUFFIX 3b. INDIVIDUAL'S LAST NAME 3c. MAILING ADDRESS STATE POSTAL CODE COUNTRY 8420 W. BRYN MAWR SUITE 300 **CHICAGO** IL60631 4. This FINANCING STATEMENT covers the following collateral: WATER TREATMENT SYSTEM-TYPE OF UNIT: RAINSOFT MODEL#: 30189 SERIAL#: 697733 697620 21179 INSTALLED AT: 2727 CLAY STREET, LAKE STATION, IN 46405 **COUNTY: LAKE** THIS IS A FIXTURE FILING

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 recordd) (or recorded) in the REAL [7, Check to REQUEST SEARCH REPORT(S) on Debtor(s) [16] ESTATE RECORDS. Attach Addendum [17] Indicate [18] Addendum	All Debtors Debtor 1 Debtor 2
8 OPTIONAL FILER REFERENCE DATA	

UCC FINANCING STATEMENT ADDENDUM FOLLOW INST, (UCTIONS (front and back) CAREFULLY	A	2635 FT 123	- 1 LS
9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCINGS 9a. ORGANIZATION'S NAME		••••••••••••••••••••••••••••••••••••••	774,1X1
OR		A AMERICAN STREET	
9b. INDIVIDUAL'S LAST NAME FIRST NAME	MIDDLE NAME, SUFFIX		
ASPROS PETER			
10. MISCELLANEOUS:	THE A	ABOVE SPACE IS FOR FILING OFFIC	CE USE ONLY
11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - Insert only on	<u></u>		
11a. ORGANIZATION'S NAME			
0.0			7
11b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
11c, MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
11d. TAX ID #: SSN OR EIN ADD'L INFO RE 11e. TYPE OF ORGANIZATION ORGANIZATION	11f. JURISDICTION OF ORGANIZATION	11g. ORGANIZATIONAL ID #, if a	
DEBTOR DECEMBER OF A COLON OF A C	No		NONE
12. ADDITIONAL SECURED PARTY'S QL ASSIGNOR S/F	D'S NAME - insert only one name (12a or 12b)		
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	d 16. Additional collateral description:		
collateral, or is filed as a X fixture filing.			
14. Description of real estate:			
1ST SUBDIV., E. GARY			
L26, BL 1 PARCEL 14-19-0046-0026			
FARCEL 14-19-0040-0020			
45			
15. Name and address of a RECORD OWNER of above-described real estate (if Debtor does not have a record interest):			
	17 Chack only if applicable and shock only	u ana hay	
	17. Check only if applicable and check only Debtor is a Trust or Trustee actin	y one box. ng with respect to property held in trust or	Decedent's Estate
	18. Check only if applicable and check only		Decedent's Estate
	Debtor is a TRANSMITTING UTILITY		
	i i	d-Home Transaction — effective 30 years	
	Filed in connection with a Public-Finance	•	