



2005 000189

FILED FOR RECORD  
2005 MAR -9 PM 1:02  
MID-AMERICA

**UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]

---

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

FARM CREDIT SERVICES  
3107 COMFORD ROAD  
VALPARAISO, IN 46384

*See oversized attachments*

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

OR	1a. ORGANIZATION'S NAME REMUS FARMS, INC			
	1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS 9380 E RIDGE RD		CITY HOBART	STATE IN	POSTAL CODE 46342
1d. TAX ID #: SSN OR EIN 35-1484517	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION	1g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

OR	2a. ORGANIZATION'S NAME			
	2b. INDIVIDUAL'S LAST NAME Remus	FIRST NAME Randall	MIDDLE NAME E	SUFFIX
2c. MAILING ADDRESS 9380 E Ridge Rd		CITY Hobart	STATE IN	POSTAL CODE 46342
2d. TAX ID #: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

OR	3a. ORGANIZATION'S NAME FARM CREDIT SERVICES OF MID-AMERICA, FLCA			
	3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS 1601 UPS DRIVE		CITY LOUISVILLE	STATE KY	POSTAL CODE 40223

4. This FINANCING STATEMENT covers the following collateral:  
 TWO (2) NEW 25'-0" X 84'-0" GUTTER CONNECTED POLY GREENHOUSES- 14'-0" UNDER GUTTER HEIGHT; INCLUDES ALL PARTS & COMPONENTS AS A COMPLETE INSTALLATION.  
 FOUR (4) NEW LB WHITE GREENGO 220N PLUS 120V NG HEATERS  
 TWO (2) NEW LB WHITE INDOOR VENT KIT  
 FOUR (4) LB WHITE THERMOSTAT KIT STAGE 2  
 NEW NURSERY JAWS 2: 72"X6" FORKS; SERIAL # 2B576SB018

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 record] (or recorded) in the REAL ESTATE RECORDS. Attach Addendum X [if applicable]

7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE] [optional]  All Debtors  Debtor 1  Debtor 2

8. OPTIONAL FILER REFERENCE DATA

*1100*

**UCC FINANCING STATEMENT ADDENDUM**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

2005 09 01 89

LAKE COUNTY  
FILED FOR RECORD

2005 MAR -9 PM 1:02

MISSOURI RECORDS

9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT

OR	9a. ORGANIZATION'S NAME REMUS FARMS, INC		
	9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX

10. MISCELLANEOUS

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (11a or 11b) - do not abbreviate or combine names

OR	11a. ORGANIZATION'S NAME				
	11b. INDIVIDUAL'S LAST NAME Remus	FIRST NAME Barbara	MIDDLE NAME A	SUFFIX	
11c. MAILING ADDRESS 9380 E Ridge Rd		CITY Hobart	STATE TN	POSTAL CODE 46342	COUNTRY USA
11d. TAX ID #: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	11e. TYPE OF ORGANIZATION	11f. JURISDICTION OF ORGANIZATION		
11g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE					

12.  ADDITIONAL SECURED PARTY'S or  ASSIGNOR S/P'S NAME - insert only one name (12a or 12b)

OR	12a. ORGANIZATION'S NAME				
	12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
12c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
12d. TAX ID #: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	12e. TYPE OF ORGANIZATION	12f. JURISDICTION OF ORGANIZATION		
12g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE					

13. This FINANCING STATEMENT covers  timber to be cut or  as-extracted collateral, or is filed as a  fixture filing.

14. Description of real estate:

SEE ATTACHED LEGAL DESCRIPTION OF REAL ESTATE

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

16. Additional collateral description:

17. Check only if applicable and check only one box.

Debtor is a  Trust or  Trustee acting with respect to property held in trust or  Decedent's Estate

18. Check only if applicable and check only one box.

Debtor is a TRANSMITTING UTILITY  
 Filed in connection with a Manufactured-Home Transaction - effective 30 years  
 Filed in connection with a Public-Finance Transaction - effective 30 years

**UCC FINANCING STATEMENT ADDENDUM**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

STATE OF TENNESSEE  
LAKE COUNTY  
FILED FOR RECORD

2005 MAR -9 PM 1:02

MICHAEL A. TOWN  
REC

9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT **2005 000189**

OR	9a. ORGANIZATION'S NAME REMUS FARMS, INC		
	9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX

10. MISCELLANEOUS

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (11a or 11b) - do not abbreviate or combine names

OR	11a. ORGANIZATION'S NAME				
	11b. INDIVIDUAL'S LAST NAME Remus	FIRST NAME Curtis	MIDDLE NAME A	SUFFIX	
11c. MAILING ADDRESS 9380 E Ridge Rd		CITY Hobart	STATE TN	POSTAL CODE 46342	COUNTRY USA
11d. TAX ID #: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	11e. TYPE OF ORGANIZATION	11f. JURISDICTION OF ORGANIZATION	11g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE	

12.  ADDITIONAL SECURED PARTY'S or  ASSIGNOR S/P'S NAME - insert only one name (12a or 12b)

OR	12a. ORGANIZATION'S NAME				
	12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
12c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
12d. TAX ID #: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	12e. TYPE OF ORGANIZATION	12f. JURISDICTION OF ORGANIZATION	12g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE	

13. This FINANCING STATEMENT covers  timber to be cut or  as-extracted collateral, or is filed as a  fixture filing.

14. Description of real estate:  
SEE ATTACHED LEGAL DESCRIPTION OF REAL ESTATE

16. Additional collateral description:

15. 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.

Debtor is a  Trust or  Trustee acting with respect to property held in trust or  Decedent's Estate

18. Check only if applicable and check only one box.

Debtor is a TRANSMITTING UTILITY  
 Filed in connection with a Manufactured-Home Transaction - effective 30 years  
 Filed in connection with a Public-Finance Transaction - effective 30 years

**UCC FINANCING STATEMENT ADDENDUM**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

2005 000189

FILED FOR RECORD

2005 MAR -9 PM 1:02

MICROFILMED BY BROWN

9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT

OR	9a. ORGANIZATION'S NAME REMUS FARMS, INC		
	9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX

10. MISCELLANEOUS

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME – insert only one debtor name (11a or 11b) – do not abbreviate or combine names

OR	11a. ORGANIZATION'S NAME				
	11b. INDIVIDUAL'S LAST NAME Remus	FIRST NAME Barbara	MIDDLE NAME C	SUFFIX	
11c. MAILING ADDRESS 9380 E. Ridge Rd		CITY Hobart	STATE IN	POSTAL CODE 46342	COUNTRY USA
11d. TAX ID #: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	11e. TYPE OF ORGANIZATION	11f. JURISDICTION OF ORGANIZATION	11g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE	

12.  ADDITIONAL SECURED PARTY'S or  ASSIGNOR S/P'S NAME – insert only one name (12a or 12b)

OR	12a. ORGANIZATION'S NAME				
	12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
12c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
12d. TAX ID #: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	12e. TYPE OF ORGANIZATION	12f. JURISDICTION OF ORGANIZATION	12g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE	

13. This FINANCING STATEMENT covers  timber to be cut or  as-extracted collateral, or is filed as a  fixture filing.

14. Description of real estate:

SEE ATTACHED LEGAL DESCRIPTION OF REAL ESTATE

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

16. Additional collateral description:

17. Check only if applicable and check only one box.

Debtor is a  Trust or  Trustee acting with respect to property held in trust or  Decedent's Estate

18. Check only if applicable and check only one box.

Debtor is a TRANSMITTING UTILITY  
 Filed in connection with a Manufactured-Home Transaction – effective 30 years  
 Filed in connection with a Public-Finance Transaction – effective 30 years

REMUS FARMS INC.  
LEASE # 265.2159122.101

LAKE COUNTY  
FILED FOR RECORD

2005 000189

2005 MAR -9 PM 1:02

MICHAEL A BROWN  
REC'D

LEGAL DESCRIPTION

Parcel 1: Part of the Southeast 1/4 of the Southeast 1/4 of Section 21, Township 36 North, Range 7 West of the Second Principal Meridian, in the City of Hobart, Lake County, Indiana, described as follows: Beginning at a point 330 feet West and 363.0 feet North of the Southeast corner of the Southeast 1/4 of the Southeast 1/4 of said Section 21; thence West, parallel with the South line of said Southeast 1/4 of the Southeast 1/4 to a point 330 feet East of the West line of said Southeast 1/4 of the Southeast 1/4; thence North, parallel with said West line, to a point 792 feet North of the South line of said Southeast 1/4 of the Southeast 1/4; thence West, parallel with said South line, to the West line of said Southeast 1/4 of the Southeast 1/4; thence North on said West line to the North line, to a point 330 feet West of the East line of said Southeast 1/4 of the Southeast 1/4; thence South and parallel with said East line to the place of beginning, except the North 280 feet thereof.

Parcel 2: Part of the Southeast 1/4 of the Southeast 1/4 of Section 21, Township 36 North, Range 7 West of the Second Principal Meridian, in Lake County, Indiana, described as follows: Beginning at a point 630 feet West of the Southeast corner of said Southeast 1/4 of the Southeast 1/4 of Section 21; thence North 363.0 feet; thence, West parallel to the South line of said Southeast 1/4 of the Southeast 1/4, a distance of 354 feet, more or less to the East line of the West 330 feet, of said Southeast 1/4 of the Southeast 1/4; thence South along said East line, 363.0 feet, more or less to the South line of said Southeast 1/4 of the Southeast 1/4; thence East, along said South line, 354 feet, more or less to the point of beginning.