

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2005 000210

2005 MAR 14 AM 11:53

MICHAEL BROWN
REC'D

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional] Chris Vischer 480-784-9623
B. SEND ACKNOWLEDGMENT TO: (Name and Address) The CIT Group/Equipment Financing, Inc. P.O. Box 27248 Tempe, AZ 85282-7248 <i>see attachment</i>

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 Family Care Center of Indiana, L.L.C.				
OR	1b. INDIVIDUAL'S LAST NAME			
1c. MAILING ADDRESS 919 Main Street, STE 202		CITY Dyer	STATE IN	POSTAL CODE 46311
1d. <u>SEE INSTRUCTIONS</u>	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION LLC	1f. JURISDICTION OF ORGANIZATION IN	1g. ORGANIZATIONAL ID #, if any IN 1995030259 <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

2a. ORGANIZATION'S NAME				
OR	2b. INDIVIDUAL'S LAST NAME			
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
2d. <u>SEE INSTRUCTIONS</u>	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)

3a. ORGANIZATION'S NAME The CIT Group/Equipment Financing, Inc.				
OR	3b. INDIVIDUAL'S LAST NAME			
3c. MAILING ADDRESS P.O. BOX 27248		CITY Tempe	STATE AZ	POSTAL CODE 85282-7248

4. This FINANCING STATEMENT covers the following collateral:

All leasehold Improvements together with all attachments, fixtures, replacements, substitutions, additions, accessions, and accessories incorporated therein and/or affixed thereto, and all proceeds of all the foregoing, including amounts payable under any insurance policy at the following address: 761 45th Avenue, STE 114, Munster, IN 46321

See Addendum consisting of one (1) page attached hereto and made a part hereof.

This Financing Statement is to be filed as a fixture filing and is to be filed in the real estate records in Lake County, IN.

5. ALTERNATIVE DESIGNATION [if applicable]:	<input type="checkbox"/> LESSEE/LESSOR	<input type="checkbox"/> CONSIGNEE/CONSIGNOR	<input type="checkbox"/> BAILEE/BAILOR	<input type="checkbox"/> SELLER/BUYER	<input type="checkbox"/> AG. LIEN	<input type="checkbox"/> NON-UCC FILING
6. <input checked="" type="checkbox"/> This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. Attach Addendum	<input type="checkbox"/> If applicable	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE] (optional)	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2	
8. OPTIONAL FILER REFERENCE DATA (90130232) Lake County-IN 831 Davis Phillips						

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2009 MAR 16 AM 11:50

VICAR... BROWN
PE... JR

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

9a. ORGANIZATION'S NAME

2005 000210

OR **Family Care Center of Indiana, L.L.C.**

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 name (11a or 11b) - do not abbreviate or combine names

11a. ORGANIZATION'S NAME

OR 11b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

11c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

11d. SEE INSTRUCTIONS

ADD'L INFO RE ORGANIZATION DEBTOR

11e. TYPE OF ORGANIZATION

11f. JURISDICTION OF ORGANIZATION

11g. ORGANIZATIONAL ID #, if any

NONE

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

12a. ORGANIZATION'S NAME

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 collateral, or is filed as a fixture filing.

14. Description of real estate:

Lot 7-A, Midwest Central Business Park, a resubdivision of Lot 7, Kennedy Court, Block 2, in Midwest Central Business Park, to the Town of Munster, as shown in Plat Book 67, page 31, in Lake County, Indiana.

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

**Excel Development LLC
332 W. US Highway 30, Suite E
Valparaiso, IN 46385**

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