



INDYS LAKE  
000218

### INFORMATION REQUEST

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT (optional) <i>QUEC</i>	FILING OFFICE ACCT #
B. RETURN TO: (Name and Address)	
RETURN ACK. TO: DATA FILING SERVICES, INC. P.O. BOX 29071 GLENDALE, CA 91209-9071	
<i>16543356.1 FOLLOW UP</i>	

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD  
2005 MAR 15 PM 12:30  
MICHAEL J. PROFFER  
FILED

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
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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)
<i>2005-000085</i>	<i>2/3/05</i>	<i>CONTINUATION FOR FIXTURE FILING</i>

3. ADDITIONAL SERVICES:

- COPY REQUEST ONLY

- DEBTOR LAKE COUNTY

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 service's name, addressee's account # with delivery service, addressee's phone #, etc.)