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UCC FINANCING STATEMENT AMENDMAN FOLLOW INSTRUCTIONS (front and back) CAREFULLY	<b>50</b> 5 000393	2005		
A. NAME & PHONE OF CONTACT AT FILER [optional]	18) 662-4141	ZWS	-2 Figure	
B. SEND ACKNOWLEDGEMENT TO: (Name and Mailing Address) 503459 IBA			MORPH TO STAN	
UCC Direct Services 66486 P.O. Box 29071	37.2			
Glendale, CA 91209-9071 ININ  FIXTU	1	ABOVE SPACE IS FOR FILING	G OFFICE USE ONLY	
1a. INITIAL FINANCING STATEMENT FILE # 306075 10-18-90 CC IN Lake			STATEMENT AMENDMENT is cord] (or recorded) in the ECORDS.	
TERMINATION: Effectiveness of the Financing Statement identified about 3. X CONTINUATION: Effectiveness of the Financing Statement identified about continued for the additional period provided by applicable law.				
4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 5. AMENDMENT (PARTY INFORMATION): This Amendment affects D  Also check one of the following three boxes and provide appropriate in CHANGE name and/or address: Give current record name in item 6a or 6b; also name (if name change) in item 7a or 7b and/or new address (if address change).	ebtor or Secured Party of record. Check  offormation in items 6 and/or 7.  so give new DELETE name: Give record.	only one of these two boxes.	n item 9.  complete item 7a or 7b. and also complete items 7d-7g (if applicable)	
6. CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME				
OR 6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
KOUIMANIS	GEORGE AND CALLY			
7. CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME				
7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
7c. MAILING ADDRESS	CITY	STATE POSTAL CO	DDE COUNTRY	
7d. SEE INSTRUCTION ADD'L INFO RE ORGANIZATION DEBTOR	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL	ID #, if any	
AMENDMENT (COLLATERAL CHANGE): check only one box.  Describe collateral deleted or added, or give entire restated collateral deleted or added.	ateral description, or describe collateral a	ssigned.		
	•			
NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMEN adds collateral or adds the authorizing Debtor, or if this is a Termination authorized		ment). If this is an Amendment a DEBTOR authorizing this Amer		
9a. ORGANIZATION'S NAME JPMORGAN CHASE BANK , NA				
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	

290627

10. OPTIONAL FILER REFERENCE DATA 6648637.2 Debtor Name: KOUIMANIS, GEORGE AND CALLY

U(	CC FINANCING STATEME	NT AMENDMEI	NT ADDENDUM	000393	<b>2065</b> (177 - 2 - p.s.
	INITIAL FINANCING STATEMENT FIL	•	endment form)		national and the second
30	6075 10-18-90 CC IN Lake				90-11 199 1 20-11 199
OR	12a, ORGANIZATION'S NAME JPMORGAN CHASE BANK, NA				A seek (i.e. a.g. attention
13.	12b. INDIVIDUAL'S LAST NAME  Use this space for additional inform	FIRST NAME	MIDDLE NAME,SUFFIX		
ā.					
*	4			THE ABOVE SPACE IS	FOR FILING OFFICE USE ONLY

Description: 1910 E COMMERCIAL, LOWELL IN. LOT 1, HOFFMAN MANOR, TOWNOF LOWELL, AS SHOWN IN PLAT BK 46, PG 144, LAKE CO, IN.