



UCC FINANCING STATEMENT AMENDMENT

State Form 50182 (5-01)

Approved by State Board of Accounts, 2001

LAKE COUNTY
FILED FOR RECORD

2005 JUN -8 PM 2:37

MICHAEL A. CROWN
CLERK

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

2005 0005.16

A. NAME AND PHONE OF CONTACT AT FILER (optional)

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

FIRST UNITED BANK
20 WEST STEGER ROAD
STEGER, IL 60475

see attachment

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE #
2004 000012

1b. This FINANCING STATEMENT AMENDMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS

2. TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement.
3. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law.
4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in item 7c; and also give name of assignor in item 9.
5. AMENDMENT (PARTY INFORMATION): This Amendment affects Debtor or Secured Party of record. Check only one of these two boxes.
Also check one of the following three boxes and provide appropriate information in items 6 and / or 7.
- CHANGE name and/or address: Give current record name in item 6a or 6b; also give new name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c. DELETE name: Give record name to be deleted in item 6a or 6b. ADD name: Complete item 7a or 7b, and also item 7c; also complete items 7d-7g (if applicable)

6. CURRENT RECORD INFORMATION:

6a. ORGANIZATION NAME

OR

| | | | |
|---|---------------------|-----------------------|--------|
| 6b. INDIVIDUAL'S LAST NAME PHILLIPPE | FIRST NAME DEWEY | MIDDLE NAME ROBERT | SUFFIX |
|---|---------------------|-----------------------|--------|

7. CHANGED (NEW) OR ADDED INFORMATION:

7a. ORGANIZATION NAME

OR

| | | | |
|----------------------------|------------|-------------|--------|
| 7b. INDIVIDUAL'S LAST NAME | FIRST NAME | MIDDLE NAME | SUFFIX |
|----------------------------|------------|-------------|--------|

7c. MAILING ADDRESS

| | | | |
|------|-------|-------------|---------|
| CITY | STATE | POSTAL CODE | COUNTRY |
|------|-------|-------------|---------|

| | | | |
|-----------------------------------|--------------------------|----------------------------------|--|
| ADD'L INFO RE ORGANIZATION DEBTOR | 7e. TYPE OF ORGANIZATION | 7f. JURISDICTION OF ORGANIZATION | 7g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE |
|-----------------------------------|--------------------------|----------------------------------|--|

8. AMENDMENT (COLLATERAL CHANGE): check only one box
Describe collateral deleted or added, or give entire restated collateral description, or describe collateral assigned.

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here and enter name of DEBTOR authorizing this Amendment.

9a. ORGANIZATION NAME
FIRST UNITED BANK

OR

| | | | |
|----------------------------|------------|-------------|--------|
| 9b. INDIVIDUAL'S LAST NAME | FIRST NAME | MIDDLE NAME | SUFFIX |
|----------------------------|------------|-------------|--------|

10. OPTIONAL FILER REFERENCE DATA
SEE ATTACHED REAL ESTATE DESCRIPTION

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

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Approved by State Board of Accounts, 2001

FOLLOW INSTRUCTIONS (FRONT AND BACK) CAREFULLY.

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2005 JUN -8 09:23:38

MICHAEL A. BROWN
REC'D

11. INITIAL FINANCING STATE FILE NUMBER (same as item 1a on Amendment form)
2004 000012

2005 000516

12. NAME OF PARTY AUTHORIZING AMENDMENT (same as item 9 on Amendment form)

12a. ORGANIZATION'S NAME
FIRST UNITED BANK

OR

| | | |
|-----------------------------|------------|---------------------|
| 12b. INDIVIDUAL'S LAST NAME | FIRST NAME | MIDDLE NAME, SUFFIX |
|-----------------------------|------------|---------------------|

13. Use this space for additional information

NAME OF RECORD OWNER:

LAKE COUNTY TRUST COMPANY TRUST NO. 5347
2200 N. MAIN ST.
CROWN POINT, IN 46307

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY