

LAKE JEJE FILEO FOT PECOLI

FOLLOW INSTRUCTIONS (front and back) CAREFULLY 2005 000527

2005 118 -8 144 2:36

. •	LLOW INSTRUCTION	o (mome ama				
A.	NAME AND PHONE OF C	CONTACT AT I	FILER (optional)			
В.	SEND ACKNOWLEDGME	NT TO: (Name	e and Address)			**
	FIRST UNITED			1		
	20 WEST STE		VD			
	STEGER, IL	604/5				
	see attachmen	nts		ıl .		
				THE ABOVE S	PACE IS FOR FILING OFFICE	E USE ONLY
1a.	INITIAL FINANCING STAT	TEMENT FILE	#		1b. This FINANCING STATEME	ENT AMENDMENT is
_	2004 000015				to be filed (for record) (REAL ESTATE RECORDS	
2.	TERMINATION: Effective	veness of the Fina	ancing Statement identified above is to	erminated with respect to security interest(s) of the	Secured Party authorizing this Termina	ation Statement.
3.	CONTINUATION: Effect continued for the additional			ith respect to security interest(s) of the Secured Pa	arty authorizing this Continuation Stater	ment is
4. [ASSIGNMENT (full or pa	artial): Give name	e of assignee in item 7a or 7b and add	ress of assignee in item 7c; and also give name of	assignor in item 9.	
	•			or Secured Party of record. Check only one	of these two boxes.	
r			provide appropriate information in item rent record name in item 6a or 6b; also			item 7a or 7b, and also
	name (if name change) in CURRENT RECORD INFO	item 7a or 7b and	Vor new address (if address change)	in item 7c. to be deleted in item 6a or 6b	item 7c; also complete i	tems 7d-7g (if applicable
J. C	6a. ORGANIZATION NAI				_	
	LAKE COUNTY TRUST COMPANY AS TRUSTEE UNDER PROVISIONS OF A TRUST*					
OR	6b. INDIVIDUAL'S LAST	NAME		FIRST NAME	MIDDLE NAME	SUFFIX
7. C	CHANGED (NEW) OR ADD		TION:			
	7a. ORGANIZATION NAI	ME				
OR	7b. INDIVIDUAL'S LAST	NAME		FIRST NAME	MIDDLE NAME	SUFFIX
7c.	MAILING ADDRESS			CITY	STATE POSTAL CODE	COUNTRY
		ADD'L INFO RE ORGANIZATION	7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #	· · · · —
	ا MENDMENT (COLLATER)	DEBTOR				☐ NONE
). N	IAME OF SECURED PAR	TY OF RECOR	RD AUTHORIZING THIS AMENI	DMENT (name of assignor, if this is an Assignmy a Debtor, check here		d by a Debtor which
a (9a. ORGANIZATION NAM		i i i iii i a i a i airimiattori autitorizeu by	y a Section, Green note was and enter harrie of De	-DI ON authorizing this Americanent.	
	FIRST UNITE					
OR	9b. INDIVIDUAL'S LAST I			FIRST NAME	MIDDLE NAME	SUFFIX
0. (OPTIONAL FILER REFER				<u> </u>	
	*AGREEMENT DA	ATED JUL	.Y 2, 2002 AND KNOW	/N AS TRUST NUMBER 5347		

UCC FYNANCING STATEMENT AMENDMENT ADDENDUM

State Form 50182 (5-01)

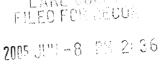
Approved by State Board of Accounts, 2001

FOLLOW INSTRUCTIONS (FRONT AND BACK) CAREFULLY.

11. INITIAL FINANCING STATE FILE NUMBER (same as item 1a on Amendment form) 2004 000015								
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 000527



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