

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

A. NAME & PHONE OF CONTACT AT FILER (optional)
TONI L. LOOMIS, (219)942-1175

B. SEND ACKNOWLEDGMENT TO: (Name and Address)
2005 000840
HFS BANK, F.S.B.
555 EAST THIRD STREET
HOBART, IN 46342-0487

2005 SEP 13 AM 8:44

MICHAEL A. BROWN
RECORDER

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 BUILDING INDUSTRIES ASSOCIATION OF NORTHWEST INDIANA, INC.				
OR		1b. INDIVIDUAL'S LAST NAME		
		FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS 756 NORTH MAIN STREET, SUITE C		CITY CROWN POINT	STATE IN	POSTAL CODE 46307
		COUNTRY USA		
1d. TAX ID #: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION CORPORATION	1f. JURISDICTION OF ORGANIZATION IN	1g. ORGANIZATIONAL ID #, if any 35-1046081 <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		
		FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
		COUNTRY USA		
2d. TAX ID #: SSN OR EIN	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 HFS BANK, F.S.B.				
OR		3b. INDIVIDUAL'S LAST NAME		
		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS 555 EAST THIRD STREET		CITY HOBART	STATE IN	POSTAL CODE 46342-0487
		COUNTRY USA		

4. This FINANCING STATEMENT covers the following collateral:

ALL OF THE PERSONAL PROPERTY AND FIXTURES LOCATED ON THE PROPERTY, THE LEGAL DESCRIPTION OF WHICH IS ATTACHED HERETO, MADE A PART HEREOF, INCLUDING ACCESSIONS, ACCESSORIES AND REPLACEMENTS, AND PROCEEDS THEREOF, INCLUDING TORT AND INSURANCE CLAIMS.

SEE ATTACHED ADDENDUM

5. ALTERNATIVE DESIGNATION (if applicable): LESSEE/LESSOR CONSIGNEE/CONSIGNOR BAILEE/BAILOR SELLER/BUYER AG. LIEN NON-UCC FILING

6. This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum (if applicable) 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (optional) All Debtors Debtor 1 Debtor 2 [ADDITIONAL FEE]

8. OPTIONAL FILER REFERENCE DATA

27-1254408

925-6033