A. NAME & PHONE OF (CONTACT AT FILER (op	300) 331-3282 Fax (81	8)-662-4141 NKONE8 5	000962		STATE OF LAKE CO FILED FOR 05 NOV - 3		
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96001273 04	IG STATEMENT FILE				1b. This FINAN to be filed (NCING STATEMENT (for record) (or record ATE RECORDS.	AMENDA led) in the	IENT is
ASSIGNMENT AMENDMENT (PAR Also check one of CHANGE name a name (if name ch	(full or partial); Give RTY INFORMATION) the following three bound/or address: Give currange) in item 7a or 7b ar	name of assignee in item 7a or	7b and address of a boor or X Secured ormation in items 6 a give new	ssignee in 7c; and also	o give name of assignment of graph of these two bostoname ADD name	gnor in item 9.	'a or 7b. a	nd also
6a. ORGANIZATION BANK ONE,	S NAME							
2	~~				MIDDLE NAME		SUFF	IX
66. INDIVIDUAL'S LA		ATION:	FIRST NAME		INIDDLE NAME			
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CHANGED (NEW) 7a. ORGANIZATION JPMORGAN C 7b. INDIVIDUAL'S LA MAILING ADDRESS O. BOX 36648 SEE INSTRUCTION AMENDMENT (COI Describe collateral	ADD'L INFO RE ORGANIZATION DEBTOR LATERAL CHANGE deleted or adde	7e. TYPE OF ORGANIZATION C): check only one box. d, or give entire restated collate	ST TO BANK ONE FIRST NAME CITY LOUISVILLE 71. JURISDICTION C	F ORGANIZATION scribe collateral assig	MIDDLE NAME STATE POST KY 402 7g. ORGANIZATIO	33 ONAL ID #, if any	SUFF	NON!
CHANGED (NEW) 7a. ORGANIZATION JPMORGAN C 7b. INDIVIDUAL'S LA MAILING ADDRESS P.O. BOX 36648 SEE INSTRUCTION AMENDMENT (COI Describe collateral NAME OF SECURE adds collateral or add: 9a. ORGANIZATION	DR ADDED INFORM S NAME HASE BANK, N.A. ST NAME ADD'L INFO RE ORGANIZATION DEBTOR LATERAL CHANGE deleted or adde	, SUCCESSOR IN INTERES 7e. TYPE OF ORGANIZATION 2): check only one box.	ST TO BANK ONE FIRST NAME CITY LOUISVILLE 7f. JURISDICTION O eral description, or de	F ORGANIZATION scribe collateral assignment and enter name of DE	MIDDLE NAME STATE POST KY 402: 7g. ORGANIZATIO	33 ONAL ID #, if any ment authorized by a	SUFF	ITRY

UCC FINANCING STATEM FOLLOW INSTRUCTIONS (front a	ENT AMENDMEN nd back) CAREFULLY	NT ADDENDUM	STATE OF INDIANA LAKE COUNTY FILED FOR RECORD
11. INITIAL FINANCING STATEMENT F 96001273 04-11-96 CC IN L	2005 NOV -3 PH 12: 54		
12. NAME of PARTY AUTHORIZING THIS AM 12a. ORGANIZATION'S NAME JPMORGAN CHASE BANK, N.A.,	MICHAEL A. BROWN		
OR 12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX	RECORDER
13. Use this space for additional infor	mation		

Description: EXHIBIT A LOTS 6 TO 11, BOTH INCLUSIVE, BLOCK 76, GARY LAND COMPANY'S FIRST SUBDIVISION, IN THE CITY OF GARY, AS SHOWN IN PLAT BOOK 6, PAGE 15, IN LAKE COUNTY, INDIANA.

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY