

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

A. NAME AND PHONE OF CONTACT AT FILER (optional) Glenn R. Patterson	2005	001005	2005 NOV 14	PM 1:39
B. SEND ACKNOWLEDGMENT TO: (Name and Address)			1 11251 1 A TO 1 A	PENOLANI
(Name and Address)	_		MICHAEL A. BROWN	
Glenn R. Patterson			RECOR	DER
Lucas, Holcomb & Medrea, LLP				
Easton Court				
300 East 90th Drive				
Merrillville, IN 46410				
Werninvine, IIV 40410				
		THE ABOVE O	PACE IS FOR FILING OFFI	CE LIGE ONLY
1a. INITIAL FINANCING STATEMENT FILE #		THE ABOVE S	1b. This FINANCING STATEM	ENT AMENDMENT IS
2004 00208			to be filed (for record) (or recorded) in the REAL ESTATE RECORDS	
2. X TERMINATION: Effectiveness of the Financing Statement identified	d above is terminated	with respect to security interest(s) of the		
CONTINUATION: Effectiveness of the Financing Statement identificontinued for the additional period provided by applicable law.	ed above with respec	t to security interest(s) of the Secured Pa	rty authorizing this Continuation State	ment is
4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or	7b and address of as	signee in item 7c; and also give name of	assignor in item 9.	
5. AMENDMENT (PARTY INFORMATION): This Amendment affects				
Also check one of the following three boxes and provide appropriate information	The second second second			
CHANGE name and/or address Give current record name in item 6 name (if name change) in item 7a or 7b and/or new address (if address	a or 6b; also give new	DELETE name: Give record to be deleted in item 6a or 6b.	name ADD name: Complete	e item 7a or 7b, and also Items 7d-7a (if applicable
6. CURRENT RECORD INFORMATION:	SS CHAILDE / ITHEILI /	, to be deleted in item ba of ob	Itali / C. also Contiblete	Items / G-/ G tij abblicable
6a. ORGANIZATION NAME				
0.0				
6b. INDIVIDUAL'S LAST NAME	FIRST	NAME	MIDDLE NAME	SUFFIX
7. CHANGED (NEW) OR ADDED INFORMATION:				
7a. ORGANIZATION NAME				
OR				
76. INDIVIDUAL'S LAST NAME	FIRST	NAME	MIDDLE NAME	SUFFIX
7c. MAILING ADDRESS	CITY		STATE POSTAL CODE	COUNTRY
ADD'L INFO RE 7 7e. TYPE OF ORGAN	UZATIONI 76 ILIE	RISDICTION OF ORGANIZATION	7a OPCANIZATIONAL ID	t if any
ORGANIZATION		RISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if any	
DEBTOR DEBTOR				□ NONE
8. AMENDMENT (COLLATERAL CHANGE): check only one box Describe collateral deleted or added, or give entire restated c				
Describe collateral deleted or added, or give entire restated c	consteral description,	or describe collateral assigned.		
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING TH	IS AMENDMENT	(name of accionar if this is an Assignment	ant). If this is an Amandment authorize	nd by a Dahrar which
adds collateral or adds the authorizing Debtor, or if this is a Termination au				ed by a Debtor windt
9a. ORGANIZATION NAME				
The Van Kalker Family Limited Partners	ship			
9b. INDIVIDUAL'S LAST NAME	FIRST	NAME	MIDDLE NAME	SUFFIX
	1			301117
10. OPTIONAL FILER REFERENCE DATA				

FILING OFFICE COPY - INDIANA UCC FINANCING AMENDMENT