



# UCC FINANCING STATEMENT

State Form 50181 (5-01)

Approved by State Board of Accounts, 2001

FOLLOW INSTRUCTIONS (FRONT AND BACK) CAREFULLY.

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2005 NOV 18 AM 8:59

MICHAEL A. BROWN  
RECORDER

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

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

2005 001017

FIFTH THIRD BANK (CHICAGO)  
1000 E. 80TH PLACE  
SUITE 200N  
MERRILLVILLE, INDIANA 46410

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - Insert only one debtor (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME <b>APAC SPINE CENTER BUILDING PARTNERSHIP, LLC</b>				
OR				
1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS <b>521 EAST 86TH, SUITE O</b>		CITY <b>MERRILLVILLE</b>	STATE <b>IN</b>	POSTAL CODE <b>46410</b>
		COUNTRY <b>USA</b>		
ADD'L INFO RE ORGANIZATION DEBTOR		1e. TYPE OF ORGANIZATION <b>LLC</b>	1f. JURISDICTION OF ORGANIZATION <b>INDIANA</b>	1g. ORGANIZATIONAL ID #, if any <b>2005082900528</b> <input type="checkbox"/> NONE

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - Insert only one debtor (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		
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 <b>FIFTH THIRD BANK (CHICAGO)</b>				
OR				
3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS <b>1000 E. 80TH PLACE, SUITE 200N</b>		CITY <b>MERRILLVILLE</b>	STATE <b>IN</b>	POSTAL CODE <b>46410</b>
		COUNTRY <b>USA</b>		

4. This FINANCING STATEMENT covers the following collateral:

All assets and all personal property now owned and hereafter acquired. All now owned and hereafter acquired inventory, accounts, equipment, general intangibles, goods, fixtures, chattel paper, instruments, investment property, deposit accounts, letter of credit rights, payment intangibles, supporting obligations, software, and all rents, issues, profits, products and proceeds thereof, wherever any of the foregoing is located.

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

6.  This FINANCIAL 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) (ADDITIONAL FEE) (optional)

All Debtors  Debtor 1  Debtor 2

8. OPTIONAL FILER REFERENCE DATA

FILING OFFICE COPY - INDIANA UCC FINANCING STATEMENT

**TICOR CP** 920058512