12/11/06 DUR# 8082	Acct # OGIO20
	Af

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional]

2007 000027

STATE OF INUIANA LAKE COUNTY FILED FOR RECORD

2007 JAN 12 PH 2: 16

MICHAEL A. BROWN RECORDER

JOYCE BRUNO (773) 380-7310 X109
B. SEND ACKNOWLEDGMENT TO: (Name and Address)

CASTLE CREDIT CORPORATION 8430 W. BRYN MAWR SUITE 750 CHICAGO, IL 60631

see attachment

	THE ABOVE SPA	CE IS FOR F	LING OFFICE U	SEONLY
ate or combine na	mar			

1.D	EBTOR'S EXACT FUI	LLLEGALNAME	insert only one debtor name (1a or 1b	o) - do not abbreviate or combine names					
	1a. ORGANIZATION'S NA								
OR	1b. INDIVIDUAL'S LAST NA	AME		FIRST NAME	MIDDLE	NAME	SUF	FIX	
	KEARBY			PAUL					
1c. N	MAILING ADDRESS			CITY	STATE	POSTAL CODE	COL	NTRY	
	95 TULIP LA			HOBART	IN	46342			
1d. §	SEEINSTRUCTIONS	ADD'L INFO RE ORGANIZATION	1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION	1g. ORG	ANIZATIONAL ID #, if any			
		DEBTOR						NONE	
2. A	DDITIONAL DEBTOR	S'S EXACT FULL	LEGAL NAME - insert only one of	debtor name (2a or 2b) - do not abbreviate or comb	ine names				
	2a. ORGANIZATION'S NA								
OR	2b. INDIVIDUAL'S LAST N	IAME		FIRST NAME	MIDDLE	MIDDLE NAME		SUFFIX	
	•								
2c. N	MAILING ADDRESS	-		CITY	STATE	POSTAL CODE	COL	NTRY	
			•						
2d. 5	SEEINSTRUCTIONS	ADD'L INFO RE	2e, TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2a ORG	ANIZATIONAL ID #, if any			
		ORGANIZATION			129.0110	and the transfer of the transf			
_		DEBTOR						NONE	
			TOTAL ASSIGNEE of ASSIGNOR S/	P) - insert only <u>one</u> secured party name (3a or 3b)				•	
	3a. ORGANIZATION'S NA								
OR			RPORATION						
	3b. INDIVIDUAL'S LAST N	IAME .		FIRST NAME	MIDDLE	NAME	SUF	FIX	
	,						- 1		
3c. N	MAILING ADDRESS	-		СПУ	STATE	POSTAL CODE	COU	NTRY	
84	30 W. BRYN	MAWR S	UITE 750	CHICAGO	IL	60631			
_									

4. This FINANCING STATEMENT covers the following collateral:

WATER TREATMENT SYSTEM-TYPE OF UNIT: RAINSOFT

MODEL#: ECA-75 SERIAL#: 911592

909622

INSTALLED AT: 2695 TULIP LANE, HOBART, IN 46342

COUNTY: LAKE

THIS IS A FIXTURE FILIN

	BAILEE/BAILOR SELLER/BUYER	AG. LIEN	NON-UCC FILING
6. This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL 7. Check to REQUES' ESTATE RECORDS. Attach Addendum [if applicable] [ADDITIONAL FEE]	T SEARCH REPORT(S) on Debtor(s) [optional]	All Debtors De	ebtor 1 Debtor 2
8. OPTIONAL FILER REFERENCE DATA	· .		
KA			
FILING OFFICE COPY — UCC FINANCING STATEMENT (FORM UCC1) (REV. 05/22/02)	International Association of Con	nmercial Admin	istrators (IACA)

UCC FINANCING STATE	MENT ADDENDUM	
FOLLOW INSTRUCTIONS (front and ba	ck) CAREFULLY	
9. NAME OF FIRST DEBTOR (1a or 1)	b) ON RELATED FINANCING STAT	TEMENT
9a. ORGANIZATION'S NAME	2007	000027
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX
KEARBY	PAUL	
10, MISCELLANEOUS:		

FILED FOR RECORD

2007 JAN 12 PM 2: 16

MICHAEL A. BROWN
RECORDER

		THE ABOVE SPACE I	S FOR FILING OFFIC	EUSE ONLY
11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one r	name (11a or 11b) - do not abbrevial		STORTIEMS STITE	L GOL GIVET
OR 11b, INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
11c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
11d. SEEINSTRUCTIONS ADD'L INFO RE 11e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR	11f. JURISDICTION OF ORGANI	ZATION 11g. ORG	ANIZATIONAL ID #, if an	y None
	NAME - insert only <u>one</u> name (1	2a or 12b)		, TONE
OR 12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
12c, MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
collateral, or is filed as a fixture filing. 14. Description of real estate: PARCEL 27-17-0311-0042 ARBOR LANE ADDITION UNIT ONE LOT 178 15. Name and address of a RECORD OWNER of above-described real estate				
(if Debtor does not have a record interest):	Filed in connection with a Pu	check only one box.	n — effective 30 years	Decedent's Estate