

2



STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

**UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional] **2007 000063**

2007 JAN 22 AM 11:43

B. SEND ACKNOWLEDGMENT TO: (Name and Address)  
  
Please return copy to:  
CT CORPORATION SYSTEM  
Attn: Jeanie Parscal  
1350 Treat Blvd, Suite 100  
Walnut Creek, CA 94597-2102  
(800) 874-8820 Ref# **8810731-9**

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				
OR				
1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
DOTSON	Robert	Michael		
1c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
5564 Van Duren Street		Merrillville	IL	46410
1d. TAX ID #: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION	1g. ORGANIZATIONAL ID #, if any
				<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	
DOTSON	Katie	M		
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
5564 Van Duren Street		Merrillville	IL	46410
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				
OR				
Sierra View Holdings Inc.				
3b. INDIVIDUAL'S LAST NAME				
OR				
3c. MAILING ADDRESS	FIRST NAME	MIDDLE NAME	SUFFIX	
C/O 9969 River Way	Delta			
			STATE	POSTAL CODE
			BC	V4G 1M8
				COUNTRY
				Canada

4. This FINANCING STATEMENT covers the following collateral:

THIS FIXTURE FILING COVERS A ROOFING SYSTEM AND IS TO BE RECORDED IN THE REAL ESTATE RECORDS OF LAKE COUNTY, IL.

COUNTY: Lake  
SITUS/ADDRESS: 1208 County Line Road, Gary, IN 46403  
PARCEL #: 25-45-0250-0015 & 16 & 17  
CONVEYS: Warranty Deed  
DOCUMENT #: 2005 051531

LEGAL: THE FOLLOWING DESCRIBED REAL ESTATE:  
LOTS 53, 54 & 55, BLOCK 8, LAKE SHORE ADDITION TO EAST CHICAGO, IN THE CITY OF GARY, AS SHOWN IN PLAT THEREOF, RECORDED IN PLAT BOOK 2, PAGE 17, IN THE OFFICE OF THE RECORDER OF LAKE COUNTY, INDIANA.

5. ALTERNATIVE DESIGNATION (if applicable):	<input type="checkbox"/> LESSEE/LESSOR	<input type="checkbox"/> CONSIGNEE/CONSIGNOR	<input type="checkbox"/> BAILEE/BAILOR	<input type="checkbox"/> SELLER/BUYER	<input type="checkbox"/> AG. LIEN	<input type="checkbox"/> NON-UCC FILING
6. <input checked="" type="checkbox"/> 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) (ADDITIONAL FEE) (optional)		<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2	
8. OPTIONAL FILER REFERENCE DATA						
LOAN NO: ILIN06001-RC						

**UCC FINANCING STATEMENT ADDENDUM**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT

9a. ORGANIZATION'S NAME			
2007 000063			
OR	9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX
	DOTSON	Robert	MICHAEL

10. MISCELLANEOUS:

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD  
2007 JAN 22 AM 11:43  
MICHAEL A. BROWN  
RECORDER

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (11a or 11b) - do not abbreviate or combine names

11a. ORGANIZATION'S NAME				
OR	11b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
11c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
				COUNTRY
11d. TAX ID #: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	11e. TYPE OF ORGANIZATION	11f. JURISDICTION OF ORGANIZATION	11g. ORGANIZATIONAL ID #, if any
				<input type="checkbox"/> NONE

12.  ADDITIONAL SECURED PARTY'S or  ASSIGNOR S/P'S NAME - insert only one name (12a or 12b)

12a. ORGANIZATION'S NAME				
OR	12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
12c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
				COUNTRY

13. This FINANCING STATEMENT covers  timber to be cut or  as-extracted collateral, or is filed as a  fixture filing

14. Description of real estate:  
 COUNTY: Lake  
 SITUS/ADDRESS: 1208 County Line Road, Gary, IN 46403  
 PARCEL #: 25-45-0250-0015 & 16 & 17  
 CONVEYS: Warranty Deed

DOCUMENT #: 2005 051531  
 LEGAL: THE FOLLOWING DESCRIBED REAL ESTATE:  
 LOTS 53, 54 & 55, BLOCK 8, LAKE SHORE ADDITION TO EAST CHICAGO, IN THE CITY OF GARY, AS SHOWN IN PLAT THEREOF,

15. Name and address of a RECORD OWNER of above-described real estate (If Debtor does not have a record interest):

16. Additional collateral description:

17. Check only if applicable and check only one box  
 Debtor is a  Trust or  Trustee acting with respect to property held in trust or  Decedent's Estate

18. Check only if applicable and check only one box  
 Debtor is a TRANSMITTING UTILITY  
 Filed in connection with a Manufactured-Home Transaction — effective 30 years  
 Filed in connection with a Public-Finance Transaction — effective 30 years

FILING OFFICE COPY — NATIONAL UCC FINANCING STATEMENT ADDENDUM (FORM UCC1Ad) (REV. 07/29/98)