



STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

INFORMATION REQUEST

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT [optional] SAMANTHA (219)545-5107	FILING OFFICE ACCT # 2007 000105	2007 FEB -5 AM 10:58
B. RETURN TO: (Name and Address) LAKE COUNTY ABSTRACTORS 1800 E. 73RD AVE. MERRILLVILLE, IN. 46410		

**MICHAEL A. BROWN
RECORDER**

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR NAME to be searched - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME
OR **Whiteco Residential, LLC.**

1b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

2. INFORMATION OPTIONS relating to UCC filings and other notices on file in the filing office that include as a Debtor name the name identified in item 1:

- 2a. SEARCH RESPONSE CERTIFIED (Optional)
Select one of the following two options: ALL (Check this box to request a response that is complete, including filings that have lapsed.) UNLAPSED
- 2b. COPY REQUEST CERTIFIED (Optional)
Select one of the following two options: ALL UNLAPSED
- 2c. SPECIFIED COPIES ONLY CERTIFIED (Optional)

Record Number	Date Record Filed (if required)	Type of Record and Additional Identifying Information (if required)
2003- 10280 001680		
2003-000915		
2003-000493		
2002-000509		
2002-000945		
2002-000507		

3. ADDITIONAL SERVICES:

2004-000389
2004-001064

Shu - 2-2-07

4. DELIVERY INSTRUCTIONS (request will be completed and mailed to the address shown in item B unless otherwise instructed here):

- 4a. Pick Up
4b. Other

Specify desired method here (if available from this office); provide delivery information (e.g., delivery service's name, addressee's account # with delivery service, addressee's phone #, etc.)