



INFORMATION REQUEST

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2007 FEB 23 PM 2:50

MICHAEL A. BROWN
RECORDER

A. NAME & PHONE OF CONTACT (optional) FILING OFFICE ACCT #
2007 000153

B. RETURN TO: (Name and Address)

Nancy Slater

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

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

1a. ORGANIZATION'S NAME
SCOTT PICKENS ENTERPRISE, INC

OR

1b. INDIVIDUAL'S LAST NAME: SCOTT

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)
		Nothing on file

3. ADDITIONAL SERVICES:

Thu 2-22-07

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.)