

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2009 028935

2009 MAY -4 AM 10:12

MICHAEL A. BROWN  
RECORDED

SWORN STATEMENT OF INTENTION TO HOLD LIEN

To: Zink Living Trust, dated June 21<sup>st</sup> 1995  
C/O Boyd D. Zink, Trustee  
639 Meadowbrook Drive  
Lowell, IN 46356

STATE OF INDIANA, COUNTY OF LAKE, SS:

The undersigned, being first duly sworn, makes this sworn statement of intention to hold a lien upon the property described below and says that:

1. The undersigned, Courtyards of Meadowbrook Property Owners' Association, Inc., an Indiana Corporation, P. O. Box 344, Lowell, Indiana, 46356, intends to hold a lien on land legally described as follows:

Lot 85 in Meadowbrook Phases 3, 4, and 5, as per plat thereof, recorded in Plat Book 80, Page 90 in the Office of the Recorder of Lake County, Indiana. *Commonly Known as 639 Meadowbrook Drive, Lowell, Indiana 46356.*

as well as on all buildings, other structures and improvements located thereon or connected therewith. **Commonly known as: 639 Meadowbrook Drive, Lowell, IN 46356**

2. The amount claimed under this statement is **Eight Hundred Thirty-Five & 00/100 Dollars (\$835.00)**. Plus interest thereon.

3. This lien is in accordance with the terms and conditions in Article 9 Section 4 of the Restrictive Covenants of Courtyards of Meadowbrook as recorded in the Office of the Recorder of Lake County, Indiana..

Courtyards of Meadowbrook Property Owners' Association, Inc.

By: Sharon Rosengard  
Sharon Rosengard, President

Subscribed and sworn to before me, a Notary Public, in and for said County and State, by Sharon Rosengard, President of Courtyards of Meadowbrook Property Owners' Association, Inc., on this 22<sup>nd</sup> day of April, 2009.

Witness my hand and notarial seal.

 Elaine M. Anderson  
Resident Of  
Lake County  
My Commission Expires:  
4/20/2016



Elaine M. Anderson  
Notary Public

My Commission Expires: 4-20-2016 Resident County: Lake

I affirm, under the penalties for perjury, that I have taken reasonable care to redact each Social Security number in this document, unless required by law.

 Elaine M. Anderson  
Resident Of  
Lake County  
My Commission Expires:  
4/20/2016

Elaine M. Anderson  
Notary Public

I hereby certify that I have this \_\_\_ day of \_\_\_\_\_, 200\_\_\_, mailed a duplicate of this notice, first-class postage prepaid, to the within named property owner at \_\_\_\_\_.

Recorder of \_\_\_\_\_ County, Indiana

This Instrument prepared by : Theodore A. Fitzgerald, (6903-64), P.O. Box 98, Hebron, IN 46341

✓ #4511  
12<sup>00</sup>  
BB

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