

A. NAME & PHONE OF CONTACT AT FILE	CAREFULLY R [optional]			
B. SEND ACKNOWLEDGMENT TO: (Name	and Address)	; 		
The state of the s	, and Address)			
GREEN TREE SEF	RVICING LLC			
7360 SOUTH KYR	ENE ROAD			
TEMPE, AZ 85283	3			
		THE ABOVE S	SPACE IS FOR FILING OFFICE	USE ONLY
a. INITIAL FINANCING STATEMENT FILE # #	1992-14015 07/15/92		1b. This FINANCING STATEN to be filed [for record] (or record) REAL ESTATE RECORDS	MENT AMENDMENT recorded) in the
. V TERMINATION: Effectiveness of the Fina	ancing Statement identified above is	terminated with respect to security interest(s) of the		
CONTINUATION: Effectiveness of the F continued for the additional period provided	inancing Statement identified above by applicable law.	e with respect to security interest(s) of the Security	red Party authorizing this Continuation	n Statement is
. ASSIGNMENT (full or partial): Give name	e of assignee in item 7a or 7b and ac	ddress of assignee in item 7c; and also give name	of assignor in item 9.	
. AMENDMENT (PARTY INFORMATION):	L f	tor or Secured Party of record. Check only	one of these two boxes.	<u> </u>
Also check <u>one</u> of the following three boxes <u>and</u> CHANGE name and/or address: Give curren			and a Committee of the	
name (if name change) in item 7a or 7b and/o	or new address (if address change)	give new DELETE name: Give record na n item 7c. to be deleted in item 6a or 6b.	ame ADD name: Complete ite item 7c; also complete ite	m 7a or 7b, and also ms 7d-7g (if applica
6a. ORGANIZATION'S NAME				
6b. INDIVIDUAL'S LAST NAME	······································	FIRST NAME	MIDDLE NAME	SUFFIX
HALL		WILLIAM	G.	00, 112
CHANGED (NEW) OR ADDED INFORMATIC	DN:			
7a. ORGANIZATION'S NAME		<u> </u>		
R				
7b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
. MAILING ADDRESS		CITY	STATE POSTAL CODE	COUNTRY
J. TAX ID #: SSN OR EIN ADD'L INFO RE 7	7. TVDE OF ODO 11/17/17/01/			
ORGANIZATION	7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if a	any
DEBTOR				N
AMENDMENT (COLLATERAL CHANGE)	· · · · · · · · · · · · · · · · · · ·			
Describe collateraldeleted oradded, or	or give entire restated collateral	description, or describe collateral assigned	d.	
	EK			
1989 BRILLIANT TOWN CRE	· I [\			
1989 BRILLIANT TOWN CRE				
14 X 66				
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14 X 66 SER# BHAL0689SN1642				
14 X 66 SER# BHAL0689SN1642 NAME OF SECURED PARTY OF RECORD	RD AUTHORIZING THIS AMEN	NDMENT (name of assignor, if this is an Assignm	nent). If this is an Amendment authoriz	zed by a Debtor whic
14 X 66 SER# BHAL0689SN1642 NAME OF SECURED PARTY OF RECORD adds collateral or adds the authorizing Debtor, or	RD AUTHORIZING THIS AMEN	NDMENT (name of assignor, if this is an Assignma and enter name of DE	nent). If this is an Amendment authori: EBTOR authorizing this Amendment.	zed by a Debtor which
14 X 66 SER# BHAL0689SN1642 NAME OF SECURED PARTY OF RECORD adds collateral or adds the authorizing Debtor, or 9a. ORGANIZATION'S NAME	if this is a Termination authorized by	a Debtor, check here and enter name of DE	nent). If this is an Amendment authorized this Amendment.	zed by a Debtor whi
NAME OF SECURED PARTY OF RECORD adds collateral or adds the authorizing Debtor, or GREEN TREE SERVICIN	if this is a Termination authorized by	REE ACCEPTANCE, INC.	EBTOR authorizing this Amendment.	
NAME OF SECURED PARTY OF RECOI adds collateral or adds the authorizing Debtor, or 9a. ORGANIZATION'S NAME GREEN TREE SERVICIN	if this is a Termination authorized by	a Debtor, check here and enter name of DE	nent). If this is an Amendment authorized this Amendment. MIDDLE NAME	zed by a Debtor whi

CC FINANCING STATE		NIADDENDUM
LLOW INSTRUCTIONS (front and ba		lment form)
. NAME OF PARTY AUTHORIZING	THIS AMENDMENT (same as its	em 9 on Amendment form)
2. NAME OF PARTY AUTHORIZING 12a. ORGANIZATION'S NAME	THIS AMENDMENT (same as ite	em 9 on Amendment form)
12a. ORGANIZATION'S NAME		
2. NAME OF PARTY AUTHORIZING 12a. ORGANIZATION'S NAME R 12b. INDIVIDUAL'S LAST NAME	THIS AMENDMENT (same as ite	em 9 on Amendment form) MIDDLE NAME,SUFFIX

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HALL, WENDY D.