

LOW INSTRUCTIONS (front and back) CAREFULLY NAME & PHONE OF CONTACT AT FILER [optional]			
NAME OF FIGURE OF CONTINUE AND THE CONTINUE OF			
SEND ACKNOWLEDGMENT TO: (Name and Address) VNS Fo	or VNS		
Corporation Service Company			
Suite 100			
2730 Gateway Oaks Drive			
Sacramento CA 95833			
194612-1		PACE IS FOR FILING OFFICE US	E ONLY
INITIAL FINANCING STATEMENT FILE #		1b. This FINANCING STATEMEN	IT AMENDMENT I
21094 Date:09/12/1988 B: P:		to be filed [for record] (or record) REAL ESTATE RECORDS.	orded) in the
★ TERMINATION: Effectiveness of the Financing Statement identified above is			
CONTINUATION: Effectiveness of the Financing Statement identified above continued for the additional period provided by applicable law.	e with respect to security interest(s) of the Secu	red Party authorizing this Continuation S	statement is
ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and ac			
AMENDMENT (PARTY INFORMATION): This Amendment affects Deb		y <u>one</u> of these two boxes	
Also check one of the following three boxes and provide appropriate information in its CHANGE name and/or address: Please refer to the detailed instructions	ems 6 and/or 7. DELETE name: Give record name	ADD name: Complete item 7a or	7b, and also item 7c:
in regards to changing the name/address of a party.	to be deleted in item 6a or 6b.	also complete items 7e-7g (if appl	icable).
CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME			
		······································	LOUSELY
6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
	······································		
CHANGED (NEW) OR ADDED INFORMATION:			
7a. ORGANIZATION'S NAME			
7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
LABOURNEO DE LA TRODE DE ODOANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if an	
ADD'L INFO RE 7e TYPE OF ORGANIZATION ORGANIZATION DEBTOR	71. JURISDICTION OF ORGANIZATION		N
AMENDMENT (COLLATERAL CHANGE): check only one box.			
Describe collateral deleted or added, or give entire restated collatera	al description, or describe collateralassign	ed.	
			<u>. </u>
. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AM adds collateral or adds the authorizing Debtor, or if this is a Termination authorized	IENDMENT (name of assignor, if this is an Assignor and enter name of	nment). If this is an Amendment authorized DEBTOR authorizing this Amendment.	ed by a Debtor wh
adds collateral or adds the authorizing Debtor, or if this is a Termination authorized 9a. ORGANIZATION'S NAME	by a Debtor, check here and enter name of	nment). If this is an Amendment authorized DEBTOR authorizing this Amendment.	ed by a Debtor wh
9a ORGANIZATION'S NAME BEDFORD FINANCIAL CORP c/o GREENPOINT C	by a Debtor, check here and enter name of CREDIT	DEBTOR authorizing this Amendment.	
adds collateral or adds the authorizing Debtor, or if this is a Termination authorized 9a. ORGANIZATION'S NAME	by a Debtor, check here and enter name of	pnment). If this is an Amendment authorized DEBTOR authorizing this Amendment. MIDDLE NAME	ed by a Debtor wh