9/14/04 PLR#7373 Acct# CGF426 ah

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200	1003000488530 1/2 \$35.50 by Cnty Judge of Probate, AL
5he 10/	3/2006 11:56:58AM FILED/CER

			Sh 10	elby Cnty Judge /03/2006 11:56:5	of Probate, HL 8AM FILED/CERT	
UCC FINANCING STATEMENT						
FOLLOW INSTRUCTIONS (front and back) CAREFULLY						
A. NAME & PHONE OF CONTACT AT FILER [optional]						
JOYCE BRUNO (773)380-7310 X-109						
B. SEND ACKNOWLEDGMENT TO: (Name and Address)						
CASTLE CREDIT CORPORATION						
8430 W. BRYN MAWR SUITE 750						
CHICAGO, IL 60631						
		THE ABOVE SPA	CE IS FO	R FILING OFFICE US	EONLY	
1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b	o) - do not abbreviate or combi	ne names				
1a. ORGANIZATION'S NAME						
OR AL INDIVIDUALICE ACTALANT	<del></del>					
TID. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE NAME		SUFFIX	
10 MAILING ADDRESS	ANTONIO					
1c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY	
6785 HIGHWAY 26	COLUMBIA		AL	35051		
1d. SEE INSTRUCTIONS ADD'L INFO RE 1e. TYPE OF ORGANIZATION ORGANIZATION	1f. JURISDICTION OF C	RGANIZATION	1g. ORG	NIZATIONAL ID#, if any		
DEBTOR	<u>.</u>				NONE	
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one de 2a. ORGANIZATION'S NAME	debtor name (2a or 2b) - do i	not abbreviate or combine r	ames			
OR 2b. INDIVIDUAL'S LAST NAME	FIRST NAME	· · · · · · · · · · · · · · · · · · ·	MIDDLE	JAME	SUFFIX	
			THE POLL I	*/ \IVIL	SUPPIX	
2c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY	
				OOI/1E OODE	COUNTRY	
2d. SEE INSTRUCTIONS ADD'L INFO RE 2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF C	RGANIZATION	2a, ORGA	NIZATIONAL ID#, if any		
ORGANIZATION ' DEBTOR I	i i		1	With the terms of the terms		
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/F	D) incortant and a				NONE	
3a. ORGANIZATION'S NAME	r)-msertomy <u>one</u> secured pa	arty name (Sa or 3b)	<u> </u>	· · · · · · · · · · · · · · · · · · ·	<del>-7. i</del>	
CASTLE CREDIT CORPORATION						
OR 3b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE N	NAME	SUFFIX	
3c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY	
8430 W. BRYNMAWR SUITE 750	CHICAGO		IL	60631		
4. This FINANCING STATEMENT covers the following collateral:						
WATER TREATMENT SYSTEM-TYPE OF UNIT: 1	PIDETECH					
VVIKIRIAN KAMENIKA IVALENIKA EN ANIVATA A A ANIVATA A ANIVATA A ANIVATA ANIVAT						
MODEL#: W/C SERIAL#: 132436						
R/O 13423		THE URIGIN	AL			
		MOERTEDN	ESS 31	ECUMEN		
INSTALLED AT: 6785 HIGHWAY 26, COLUMBIA,		BY THIS FIN STATEMENT	ANCIN	1G 11990	<b></b>	
		STATEMENT	155		in.	
COUNTY: SHELBY		TAX DUE \$.	1-5		*	
	₩.	= <b>1</b>				
	•					
THIS IS A FIXTURE FILING						
5. ALTERNATIVE DESIGNATION [if applicable]: LESSEE/LESSOR CONS	SIGNEE/CONSIGNOR	BAILEE/BAILOR S	SELLER/BU	YER AG. LIEN	NON-UCC FILING	

5. ALTERNATIVE DESI	IGNATION [if applicable]: LESSEE/LI	SSOR CONSIGNEE/CONS	SIGNOR BAILEE/BAILOF	SELLER/BUYER	AG. LIEN	NON-U	CC FILING
6. This FINANCING SESTATE RECORD	STATEMENT is to be filed [for record] (or DS. Attach Addendum	recorded) in the REAL 7. Che	ck to REQUEST SEARCH RE	PORT(S) on Debtor(s) [optional]	All Debtors	Debtor 1	Debtor 2
8. OPTIONAL FILER RE	FERENCE DATA						
JS							

20061003000488530 2/2 \$35.50 Shelby Cnty Judge of Probate, AL 10/03/2006 11:56:58AM FILED/CERT

	STATEMENT AI (front and back) CAREFUL							
	OR (1a or 1b) ON RELAT		TEMENT					
9a. ORGANIZATION'S NA								
R								
9b. INDIVIDUAL'S LAST N			MIDDLE NAME, SUFFIX					
CHAVEZ	AN	TONIO						
D. MISCELLANEOUS:								
4 ADDITIONAL DEDTO				· · · · · · · · · · · · · · · · · · ·		S FOR FILING OFFIC	E USE O	NLY
1. ADDITIONAL DEBTO		NAME - insert only <u>one</u> r	name (11a or 11b) - do not abbrevi	ate or combine names	<del>: : : : : : : : : : : : : : : : : : : </del>		<del> </del>	<del></del>
11b. INDIVIDUAL'S LAST	VAME	- <u></u>	FIRST NAME	MIDDLE NAME		NAME	SUFFI	
c. MAILING ADDRESS			CITY	s	TATE	POSTAL CODE	coul	NTRY
					·- <u></u>			
d. <u>SEEINSTRUCTIONS</u>	ORGANIZATION	OF ORGANIZATION	11f. JURISDICTION OF ORGAN	NIZATION 11	lg. ORG	SANIZATIONAL ID #, if an	<b>y</b>	
A DOUTION OF O	DEBTOR							NO
12a. ORGANIZATION'S NA	URED PARTY'S or	ASSIGNOR S/P'S	NAME - insert only <u>one</u> name	(12a or 12b)				
12b. INDIVIDUAL'S LAST I	VAME		FIRST NAME	М	IDDLE I	VAME	SUFF	-IX
c. MAILING ADDRESS			CITY	s	TATE	POSTAL CODE	cour	NTRY
	· · · · <u>- · · · · · · · · · · · · · · ·</u>							
This FINANCING STATEM		ut or as-extracted	16. Additional collateral descrip	otion:				
collateral, or is filed as a  Description of real estate:	Tixture filing.							
ACCOUNT NUMB	TP.							
232031001017000								
LEGAL DESCRIP	TION OF LAND:							
Subdiv: KENTON-I	BRANT NICKERSO	N						
Lot Dim #1: 105								
Lot Dim #2:202								
. Name and address of a RE (if Debtor does not have a r	CORD OWNER of above-descri	ibed real estate						
(" Donioi does not nave a f	oona microsy.							
			4 =			;: <u> </u>		
			17. Check only if applicable and	· <del></del>		<b></b>	٦ _	
			Debtor is a Trust or Total  18. Check only if applicable and		ect to pr	operty held in trust or	Decedent	i's Esta
			Debtor is a TRANSMITTING	_				
			Filed in connection with a N		1saction	— effective 30 years		
			Filed in connection with a F					