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UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

OLLOW MOTION (MOTION MOTION MO	
A. NAME & PHONE OF CONTACT AT FILER [optional] Phone:(800) 331-3282 Fax: (818)	662-4141
B. SEND ACKNOWLEDGEMENT TO: (Name and Address)	10656 PRIME ACCEPTAN
UCC Direct Services	13642694
P.O. Box 29071	ALAL
Glendale, CA 91209-9071	FIXTURE
File with: CC AL S	Shelby, AL

20080306000001700	
 	<i>(')</i>
Shelby Cnty Judge o 03/06/2008 11:20:56	E Production and

	<u></u>							
		File with:	CC AL Shelby, AL		THE ABOVE SPA	ACE IS FOR FI	LING OFFICE USE ONLY	/
	ERTOR'S EXACT FU	LIEGAL NAME -	insert only one_debtor name (1	a or 1b) - do not ab	previate or combine nam	nes		
	1a. ORGANIZATION'S N	<u></u>		<u> </u>				
R	1b. INDIVIDUAL'S LAST	NIΔME		FIRST NAME BRITTANY		MIDDLE	SUFFIX	
	1	INCIVIL						
	BOWIE			CITY	<u> </u>	STATE	POSTAL CODE	COUNTRY
	MAILING ADDRESS 02 HILLSBORO LN			HELENA		AL	35080	USA
1d. SEE INSTRUCTIONS ADD'L INFO RE OF ORGANIZATION ORGANIZATION DEBTOR		i e e e e e e e e e e e e e e e e e e e	1f. JURISDICTION	OF ORGANIZATION	1g. ORG	NONE		
2 A	DDITIONAL DEBTOR	'S EXACT FULL LE	GAL NAME - insert only one	debtor name (2a or	2b) - do not abbreviate o	r combine na	mes	
	2a. ORGANIZATION'S I		<u> </u>					
DR	2b. INDIVIDUAL'S LAST	INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE NAME		SUFFIX
2c. l	MAILING ADDRESS		<u> </u>	CITY		STATE	POSTAL CODE	COUNTRY
2d. 3	SEE INSTRUCTIONS	ADD'L INFO RE	2e. TYPE OF ORGANIZATION	2f. JURISDICTION	OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any		
		ORGANIZATION DEBTOR						NONE
3. S	SECURED PARTY'S N	AME (or NAME of	TOTAL ASSIGNEE of ASSIGN	OR S/P) - insert only	y o <u>ne</u> secured party na	me (3a or 3b)	<u> </u>	
	3a. ORGANIZATION'S Prime Acceptar	_						
OR INDIVIDUALIST ACT NAME		FIRST NAME	F MIDDLE NAME		NAME	SUFFIX		
	3b. INDIVIDUAL'S LAST NAME							
20 1	MAILING ADDRESS	<u> </u>	<u> </u>	CITY		STATE	POSTAL CODE	COUNTRY
	0 W Jackson Blv	d. Suite 720		Chicago		IL	60606	USA

4. This FINANCING STATEMENT covers the following collateral:

WATER TREATMENT SYSTEM

Complete only when filing with the Ju The initial indebtedness secured by t Mortgage tax due (\$.15 per \$100,00	this financing statement is \$6,590.00	
5. ALTERNATIVE DESIGNATION [if applicable]	ESSEE/LESSOR CONSIGNEE/CONSIGNOR BAILEE/BAILOR SELLEIVBUTEIX AO. EIEW	NON-UCC FILING
6. X This FINANCING STATEMENT is to be filed [for ESTATE RECORDS. Attach Addendum	or record] (or recorded) in the REAL 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [if applicable] [ADDITIONAL FEE] [optional] All Debtors D	ebtor 1 Debtor 2
8. OPTIONAL FILER REFERENCE DATA 13642694	620092885	

FINANCING STATEMEN FOLLOW INSTRUCTIONS (front and back)	TADDENDUM CAREFULLY					
9. NAME OF FIRST DEBTOR (1a or 1b) ON		ENT				
9a. ORGANIZATION'S NAME						
9b. INDIVIDUAL'S LAST NAME BOWIE	FIRST NAME BRITTANY	MIDDLE NAME, SUFFIX				
10. MISCELLANEOUS						
13642694-AL-117						
10656 PRIME ACCEPTAN						
620092885						
File with: CC AL Shelby, AL			THE ABOVE SPA	ACE IS FOI	R FILING OFFICE USE	ONLY
11. ADDITIONAL DEBTOR'S EXACT FULL	LEGAL NAME - insert only one_ n	ame (11a or 11b) - do not a	bbreviate or combine	e names		
11a. ORGANIZATION'S NAME						
OR 11b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE	NAME	SUFFIX
11c. MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
11d. <u>SEE INSTRUCTION</u> ADD'L INFO RE ORGANIZATION		11f. JURISDICTION OF ORG	SANIZATION	11g. OR	GANIZATIONAL ID #, i	f any
DEBTOR 12. ADDITIONAL SECURED PARTY'S 12a. ORGANIZATION'S NAME	S or ASSIGNOR S/P's NA	AME - insert only one name	e (12a or 12b)			
OR 12b. INDIVIDUAL'S LAST NAME	<u></u>	FIRST NAME		MIDDLE	NAME	SUFFIX
12c. MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
13. This FINANCING STATEMENT covers collateral or is filed as a X fixture filing.	timber to be cut or as-extracted	16. Additional collateral desc	cription:			
14. Description of real estate:						
Description: LOT 6, BLOCK 4, A RESURVEY OF BLOCK 4, OF A BRECKENRIDGE PARK, AS RE 9, PAGE 150, IN THE OFFICE O PROBATE OF SHELBY COUNTY 13-8-28-1-001-024-012 SUBDIVIS PARK RESURVEY LEGAL LOT:	RESURVEY OF CORDED IN MAP BOOK OF THE JUDGE OF Y, ALABAMA. APN: SION: BRECKENRIDGE					
15. Name and address of a RECORD OWNER of (if Debtor does not have a record interest):	above-described real estate					
		17. Check only if applicable a			orty hold in touch	Doodonic
			Trustee acting with respond check only one box	····	erty held in trust or	Decedent's E
		18. Check <u>only</u> if applicable a		•		

Filed in connection with a Manufactured-Home Transaction -- effective 30 years