Greystone S  (Att: Leslie 419 Belle Ai Warrenton,	SMENT TO: (Name of the lane)  In Lane	R [optional] e and Address)	2009031: Shelby 03/12/2	30312000089810 1/5 \$34.00 By Cnty Judge of Probate, AL 12/2009 09:20:58AM FILED/CERT			
			THE ABOVE	SPACE IS FO	R FILING OFFICE US	E ONLY	
		insert only <u>one</u> debtor name (1a or 1b)	) - do not abbreviate or combine names				
1a. ORGANIZATION'S N  MATURE OP		RCARE INC					
16. INDIVIDUAL'S LASTI		ItCHILD, II tC.	FIRST NAME	MIDDLE NAME		SUFFIX	
- MAILING ADDRESS	<del>, , , , , , , , , , , , , , , , , , , </del>		CITY	STATE	POSTAL CODE	COUNTRY	
: MAILING ADDRESS 1072 Milners Cres	cent		Birmingham	AL	35242	USA	
SEEINSTRUCTIONS	ADD'L INFO RE	1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION		ANIZATIONAL ID #, if any		
	ORGANIZATION DEBTOR	corporation	Alabama	257 -	853	NC	
2b. INDIVIDUAL'S LAST  E. MAILING ADDRESS  E. SECURED PARTY'S  3a. ORGANIZATION'S N  Greystone Servents  3b. INDIVIDUAL'S LAST	ADD'L INFO RE ORGANIZATION DEBTOR  NAME (or NAME of TAME) IAME		CITY  2f. JURISDICTION OF ORGANIZATION  P) - insert only one secured party name (3a or 3b)  FIRST NAME	MIDDLE  STATE  2g. ORG	POSTAL CODE  ANIZATIONAL ID #, if any	COUNTRY	
c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY	
, MAILING ADDRESS			Warrenton	VA	20186	USA	
Зъ. INDIVIDUAL'S LAST	<del></del>		CITY	STATE	POSTAL CODE	COU	

Probate Office of Shelby County, Alabama

UCC FINANCING STATE FOLLOW INSTRUCTIONS (front and b							
9. NAME OF FIRST DEBTOR (1a or		TEMENT					
9a. ORGANIZATION'S NAME	· · · · · · · · · · · · · · · · · · ·						
OR MATURE OPTIONS EI	· · · · · · · · · · · · · · · · · · ·	- 400 C - 414 C O (CC)					
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX					
10.MISCELLANEOUS:		· · · · · · · · · · · · · · · · · · ·			1 <b>41 1/1</b>		
			THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY				
11. ADDITIONAL DEBTOR'S EXACT	FULL FGAL NAME - insert only one n	ame (11a or 11b) - do not abbrev				L GOL GITLI	
11. ADDITIONAL DEBTOR'S EXACT	FULL LEGAL IVAIVIE - Insert only one in	ame (ma or mu) - do not abbier	Material Constitution of the constitution of t			<u> </u>	
OR 11b. INDIVIDUAL'S LAST NAME		FIRST NAME	<del></del>	MIDDLE	NAME	SUFFIX	
TTB. INDIVIDUAL'S LAST NAME		FIRST NAIVIE		WIIDDEL	1 4/ XIVIL		
11c, MAILING ADDRESS	· - · · · · · · · · · · · · · · · · · ·	CITY		STATE	POSTAL CODE	COUNTRY	
11d. <u>SEEINSTRUCTIONS</u> ADD'L INFO		11f. JURISDICTION OF ORGANIZATION		11g. ORGANIZATIONAL ID #, if any			
DEBTOR						NONE	
12. ADDITIONAL SECURED PA 12a. ORGANIZATION'S NAME	RIY'S or MASSIGNOR S/P'S	NAME - insert only <u>one</u> name	e (12a or 12b)	<u>.</u>			
U.S. Secretary of Housin	g and Urban Development						
12b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE	NAME	SUFFIX	
12c. MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY	
950 22nd Street North, Suite	l Forum Building e 900	Birmingham		AL	35203	USA	
13. This FINANCING STATEMENT covers		16. Additional collateral descr	iption:				
collateral, or is filed as a 📝 fixture filing.		See Exhibits "A" and "B" attached hereto and made part hereof.					
14. Description of real estate:							
Maplewood Ridge (FHA Prolocated at 2124 Old Montgo Shelby County, Alabama 35	mery Highway, Pelham,						
Parcel # 117361001031000							
See Exhibit "A" attached he hereof.	ereto and made part						
15. Name and address of a RECORD OWN (if Debtor does not have a record interes							
Pelham Senior Living Tripl	le Net. LLC						
	· · · · · · · · · · · · · · · · · · ·	17. Check <u>only</u> if applicable a	nd check <u>only</u> one bo	х.			
		Debtor is a Trust or	Trustee acting with re	espect to p	property held in trust or	Decedent's Estat	
		18. Check only if applicable a	nd check <u>only</u> one bo	X.			
		Debtor is a TRANSMITTIN		<b>-</b>	## 11 AA		
		Filed in connection with a					
		Filed in connection with a Public-Finance Transaction — effective 30 years					

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## EXHIBIT "A" TO SUPPLEMENTAL SECURITY AGREEMENT AND FINANCING STATEMENTS

## Legal Description of Real Property

A part of Northeast ¼ of the Northeast ¼ of Section 36, Township 19 South, Range 3 West, being more particularly described as follows:

Commence at the Southeast corner of the Northeast ¼ of the Northeast ¼ of Section 36, Township 19 South, Range 3 West; thence run West along the South line of said ¼ - ¼ Section 138.44 feet to an existing iron pin and the point of beginning; thence continue West along the last described course 324.18 feet; thence turn right 116 degrees 32 minutes 26 seconds and run Northeasterly 247.63 feet to a point on the Southwesterly Right of Way of Old Montgomery Highway; thence turn right 92 degrees 00 minutes 07 seconds and run Southeasterly along said Right of Way line 294.56 feet; thence turn right 90 degrees 42 minutes 00 seconds and run Southwesterly 92.59 feet to the point of beginning; being situated in Shelby County, Alabama.

LESS AND EXCEPT any part of subject property lying within a road Right-Of-Way.

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## EXHIBIT "B" TO SUPPLEMENTAL SECURITY AGREEMENT AND FINANCING STATEMENTS OF ADDITIONAL DEBTOR

## Collateral Description

This Exhibit "B" is attached to, incorporated by reference in, and forms a part of that certain Supplemental Security Agreement and Financing Statements (collectively, the "Security Documents") executed and delivered by MATURE OPTIONS ELDERCARE, INC. (the "Additional Debtor"), in favor of GREYSTONE SERVICING CORPORATION, INC., a Georgia corporation (the "Secured Party") and in connection with the leasing and operation of the Project (as hereinafter defined). This Exhibit "B" refers to the following collateral, which may be now or hereafter located on the premises of, relate to, or be used in connection with, the construction, financing, repair, ownership, management, and operation of a certain assisted living facility identified as Maplewood Ridge, FHA Project No. 062-22033, and located at 2124 Old Montgomery Highway, Pelham, Shelby County, Alabama 35124 (the "Project"), and owned by PELHAM SENIOR LIVING TRIPLE NET, LLC (the "Debtor"), and leased and operated by the Additional Debtor:

- All income, rents, profits, receipts and charges derived from the Project, including any and all accounts receivable or health-care-insurance receivables owed or payable to the Project or the Additional Debtor by any resident or patient of the assisted living facility and/or any health related program operated by the Additional Debtor at the Project, or otherwise owed or payable by any entity for or on behalf of any such resident or patient of the Project, including all Project income derived from private pay, benefits and reimbursements under any provider agreements with Medicaid, Medicare, State and/or local programs, payments from health care insurers and/or any other assistance providers, together with all rents, charges and fees received or owed to the Project or the Additional Debtor from leasing any portion of the Project, and all contributions, donations, gifts, grants, bequests and endowment funds by donors and all other Project revenues received from any source paid or unpaid, and all undisbursed funds in Surplus Cash, Residual Receipts, escrow accounts and other assistance available for Project operation; provided, however that all of the foregoing shall be strictly limited to any income, accounts receivable and the like of the Additional Debtor derived from the Project and shall not include any other income, accounts receivable and the like of the Additional Debtor.
- 2. All of Additional Debtor's right, title and interest in and to the following described collateral and property and/or interests in such collateral and property: (a) All licenses, permits, certificates and agreements for the provision of property or services to or in connection with, or otherwise benefitting, the Project, including but not limited to all licenses issued with respect to the Project by the Alabama Department of Public Health, all certificates of need, all Medicare and Medicaid provider agreements and all other and similar provider agreements, and (b) all rights and claims thereunder, to the extent assignable; provided, however, the Secured Party disclaims a security interest in such of the collateral described in this Exhibit "B" to the extent that a security interest in such collateral may not be granted to the Secured Party without the violation of law or the forfeiture of the rights of the Additional Debtor (or any assignee of the Additional Debtor) or a

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default resulting thereunder. The Secured Party further acknowledges that any right to repossess any collateral described in this Exhibit "B" does not necessarily transfer or confer the authority to operate a licensed group assisted living facility or any related operations at the Project, or provide nursing or long term care services, or to collect Medicare, Medicaid, or other health insurance accounts receivables, and the Additional Debtor makes no representations as to the validity or enforceability of the lien of such security interest in the collateral described in this Exhibit "B".

3. All leaseholds, licenses, permits, certificates and agreements for the provision of property or services to or in connection with, or otherwise benefitting, the premises, including, but not limited to, operating leases, assisted living facility licenses, certificates of need, bed authorities, Medicare and Medicaid provider agreements (if any), including any payments or claims thereunder; provided, the Secured Party disclaims a security interest in such of the collateral described in this sentence to the extent that government regulations provide that the grant of a security interest in such property to the Secured party will Result in a forfeiture of the rights of the Debtor therein, or in a default f the Debtor's obligations thereunder.

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