

UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] **ADRIANA FERNANDEZ (800) 837-9700** B. SEND ACKNOWLEDGMENT TO: (Name and Address) 'CASTLE CREDIT CORPORATION 8430 W BRYN MAWR SUITE 750 CHICAGO IL 60631 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY I. DEBTOR'S EXACT FULL LEGAL NAME-insert only one debtor name (1a or 1b)-do not abbreviate or combine names 1a. ORGANIZATION'S NAME SUFFIX 1b. INDIVIDUAL'S LASTNAME MIDDLE NAME FIRST NAME BRENT **BAUGH** COUNTRY POSTAL CODE STATE 1c. MAILING ADDRESS CITY **MONTEVALLO** 35115 323 EWING ST 1g. ORGANIZATIONAL ID #, if any 1f. JURISDICTION OF ORGANIZATION 1d. SEEINSTRUCTIONS ADD'L INFO RE 1e. TYPE OF ORGANIZATION ORGANIZATION NONE DEBTOR 2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names 2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S LAST NAME MIDDLE NAME SUFFIX FIRST NAME POSTAL CODE STATE COUNTRY 2c. MAILING ADDRESS CITY 2g. ORGANIZATIONAL ID #, if any ADD'L INFO RE 2e. TYPE OF ORGANIZATION 2f. JURISDICTION OF ORGANIZATION 2d. SEEINSTRUCTIONS ORGANIZATION NONE DEBTOR 3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b) 3a, ORGANIZATION'S NAME CASTLE CREDIT CORPORATION 3b. INDIVIDUAL'S LAST NAME MIDDLE NAME SUFFIX FIRST NAME COUNTRY POSTAL CODE STATE 3c. MAILING ADDRESS CITY **CHICAGO** 60631 **8430 W. BRYN MAWR SUITE 750** 4. This FINANCING STATEMENT covers the following collateral: WATER TREATMENT SYSTEM TYPE OF UNIT: RAINSOFT INSTALLED AT: 323 EWING ST, MONTEVALLO, AL 35115 THE ORIGINAL INDESTEDNESS SECURED **COUNTY: SHELBY** BY THIS FINANCING THIS IS A FIXTURE FILING STATEMENT IS S. **NON-UCC FILING** SELLER/BUYER 5. ALTERNATIVE DESIGNATION [if applicable]: LESSEE/LESSOR CONSIGNEE/CONSIGNOR BAILEE/BAILOR This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL

ESTATE RECORDS. Attach Addendum

[if applicable] 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) All Debtors IADDITIONAL FEEL [optional] 8, OPTIONAL FILER REFERENCE DATA

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	International Association of Commercial Administrators (IACA)

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12-10-09

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UCC FINANCING STATEMENT ADDENDUM FOLLOW INSTRUCTIONS (front and back) CAREFULLY 9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT 9a. ORGANIZATION'S NAME 9b. INDIVIDUAL'S LAST NAME MIDDLE NAME, SUFFIX FIRST NAME **BAUGH** BRENT 10. MISCELLANEOUS: THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (11a or 11b) - do not abbreviate or combine names 11a. ORGANIZATION'S NAME 11b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX 11c. MAILING ADDRESS CITY POSTAL CODE STATE COUNTRY ADD'L INFO RE 11e. TYPE OF ORGANIZATION 11d. SEEINSTRUCTIONS 11f. JURISDICTION OF ORGANIZATION 11g. ORGANIZATIONAL ID #, if any ORGANIZATION NONE DEBTOR ADDITIONAL SECURED PARTY'S of ASSIGNOR S/P'S NAME - insert only one name (12a or 12b) 12a. ORGANIZATION'S NAME 12b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX 12c. MAILING ADDRESS CITY STATE COUNTRY POSTAL CODE 13. This FINANCING STATEMENT covers timber to be cut or as-extracted 16. Additional collateral description: collateral, or is filed as a fixture filing.

14. Description of real estate: PARCEL NUMBER: 36-2-09-2-001-013-000 LEGAL DESCRIPTION: LOT 8 BLOCK B WILMONT SUBD **SEC 09 TWN 24N RNG 12E** 15. Name and address of a RECORD OWNER of above-described real estate (if Debtor does not have a record interest): 17. Check <u>only</u> if applicable and check <u>only</u> one box. Debtor is a Trust or Trustee acting with respect to property held in trust or Decedent's Estate 18. Check only if applicable and check only one box. Debtor is a TRANSMITTING UTILITY Filed in connection with a Manufactured-Home Transaction — effective 30 years Filed in connection with a Public-Finance Transaction — effective 30 years