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UCC FINANCING STATEMENT

A. NAME & PHONE OF CONTACT AT FILER [optional] 320-202-7000 ANGIE B. SEND ACKNOWLEDGMENT TO: (Name and Address) PREFERRED CREDIT, INC				
B. SEND ACKNOWLEDGMENT TO: (Name and Address)				
DDEEDOED CEFDIT INC				
DDEEDOED CERDIC INC				
PREFERRED CIMPLI, INC				
PO BOX 1679				
ST.CLOUD MN 56302				
			•	
	THE ABOVE S	SPACE IS FO	R FILING OFFICE USE	ONLY
1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or	r 1b) - do not abbreviate or combine names	<u></u> <u></u>	·	
1a. ORGANIZATION'S NAME				
		<u> </u>		
OR 1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME		SUFFIX
BROWN	BRANDON			
1c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
1008 MERIWEATHER COURT	CALERA	AL	35040	
1d. TAX ID #: SSN OR EIN ADD'L INFO RE 1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION	1g. ORGA	NIZATIONAL ID #, if any	
ORGANIZATION	* 	I		NONE
	obter came (2a or 2b) - do not abbreviate or comb	ine names		
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one de 2a. ORGANIZATION'S NAME	BOTOL LIGHT (59 OF 50) - GO HOT SOOL OF GOTHE			
Za. Urganiza i chi ci i chi ci				
OR 2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	SUFFIX	
	MARY	S		
BROWN	CITY	STATE	POSTAL CODE	COUNTRY
2c. MAILING ADDRESS	CALERA	AL	35040	
1008 MERIWEATHER COURT	2f. JURISDICTION OF ORGANIZATION	2g. ORG	ANIZATIONAL ID #, if any	
2d. TAX ID #: SSN OR EIN ADD'L INFO RE 2e. TYPE OF ORGANIZATION ORGANIZATION	21.00(1001011011011011011011011011011011011			
NOT REQUIRED IN WIS' DEBTOR				NONE
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR	S/P) - insert only one secured party name (3a or 3	3b)		
3a. ORGANIZATION'S NAME				
PREFERR	TEVENCE MANAGE	MIDDLE	NAME	SUFFIX
3b. INDIVIDUAL'S LAST NAME	FIRST NAME	IVIIODEL		
		STATE	POSTAL CODE	COUNTRY
3c. MAILING ADDRESS	CITY			
PO BOX 1679	ST. CLOUD	MN	56302	

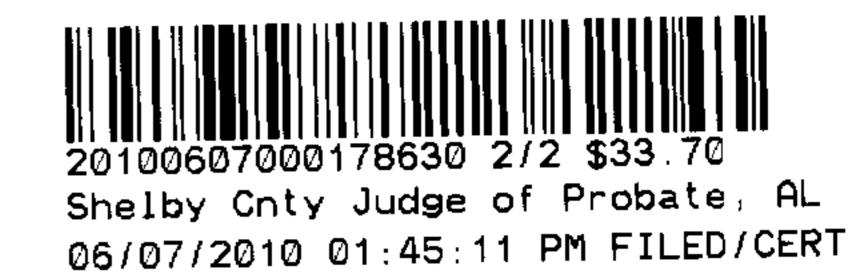
*** PURCHASE MONEY SECORTLY INTEREST IN:

RAINSOFT WATER SOFTENER WATER TREATMENT SYSTEM SERIAL NUMBER 1115732 AND RESERVE OSMOSIS NUMBER 9999, 43756.

5 ALTER	NATIVE DESIGNAT	ION fit applicable):	LESSEE/LESSOR	CONSIGNEE	/CONSIGNOR	BAILEE/BAILOR	SELLER/BUYER		AG. LIEN_	NON	-UCC FILING
6. Thi	S FINANCING STATE	EMENT is to be filed	for record) (or recorded) i			UEST SEARCH REPOR	RT(S) on Debtor(s) [optional]	All [Debtors	Debtor 1	Debtor 2
	NAL FILER REFERE										
010	11101 C	HUTEV A	5 44 35 11	J							

FILING OFFICE COPY — NATIONAL UCC FINANCING STATEMENT (FORM UCC1) (REV. 07/29/98)

^{*} An Individual's social security number is not required to be placed on the form in Wisconsin (See Instructions)



UCC FINANCING STATEM		M			
FOLLOW INSTRUCTIONS (front and back) 9. NAME OF FIRST DEBTOR (1a or 1b)		STATEMENT			
9a. ORGANIZATION'S NAME	7 011 11227 1122 1 1147 1140 1140				
OR					
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME,SUFF	IX		
BROWN	BRANDAN				
10. MISCELLANEOUS:					
			THE ABOVE SPACE	IS FOR FILING OFF	ICE USE ONLY
11. ADDITIONAL DEBTOR'S EXACT F	ULL LEGAL NAME - insert only	one name (11a or 11b) - do not abb	reviate or combine names		
11a. ORGANIZATION'S NAME					
OR 11b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	NAME	SUFFIX
BROWN		MARY	S		
11c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
1008 MERIWEATHER	COURT	CALERA	AL	35040	
11d. SEE INSTRUCTIONS ADD'L INFO FOR ORGANIZATION DEBTOR		11f. JURISDICTION OF OR	GANIZATION 11g. OR	GANIZATIONAL ID #, if	any NONE
12. ADDITIONAL SECURED PAR	TY'S or ASSIGNOR S	S/P'S NAME - insert only <u>one</u> na	ame (12a or 12b)		
12a. ORGANIZATION'S NAME					
OR 12b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	NAME	SUFFIX
120. INDIVIDUAL S LAST NAIVIE			74110000		
12c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
13. This FINANCING STATEMENT covers	timber to be cut or as-extrac	cted 16. Additional collateral des	scription:		
collateral, or is filed as a fixture filing	f -	<u> </u>			
14. Description of real estate:					
LEGAL DESCRIPTION:					
LOT 96 SUBDIVISION ME	RIWEATHER				
SECTOR 3 APN: 24-4-20-0-000-056-000					
ATTI. 24-4-20-0-000-050-000					
SHELY COUNTY AL					
15. Name and address of a RECORD OWNER (if Debtor does not have a record interest)					
BRANDAN BROWN MARY S BROWN		47 01 1 1 1			
MARY S BROWN 1008 MERIWEATHER COL	[] RT	17. Check only if applicable	e and check <u>only</u> one box. Trustee acting with respect to p	angagetu baldim kurut —-	Dood4- 5-4-4
CALERA AL 35040	~ ~ ~ ~	Debtor is a Trust or 18. Check only if applicable		property nero in trust of	Decedent's Estate
		Debtor is a TRANSMIT			
			a Manufactured-Home Transaction	on	
			n a Public-Finance Transaction		