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08/03/2010 01:32:09 PM FILED/CERT UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] B. SEND ACKNOWLEDGMENT TO: (Name and Address) GREEN TREE SERVICING, LLC 7360 S KYRENE RD, T-313 TEMPE, AZ 85283 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1b. This FINANCING STATEMENT AMENDMENT is 1a. INITIAL FINANCING STATEMENT FILE # to be filed [for record] (or recorded) in the BK PG 12/28/2000 File #2000-44946 REAL ESTATE RECORDS. TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in item 7c; and also give name of assignor in item 9. 5. AMENDMENT (PARTY INFORMATION): This Amendment affects Debtor or Secured Party of record. Check only one of these two boxes. Also check one of the following three boxes and provide appropriate information in items 6 and/or 7. CHANGE name and/or address: Give current record name in item 6a or 6b; also give new name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c. ■ ADD name: Complete item 7a or 7b, and also DELETE name: Give record name to be deleted in item 6a or 6b. item 7c; also complete items 7d-7g (if applicable). 6. CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME 6b. INDIVIDUAL'S LAST NAME MIDDLE NAME FIRST NAME **SUFFIX GEORGE** SMITH CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME FIRST NAME MIDDLE NAME SUFFIX 7c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY ADD'L INFO RE | 7e. TYPE OF ORGANIZATION Ff. JURISDICTION OF ORGANIZATION g. ORGANIZATIONAL ID #, if any 7d. TAX ID #: SSN OR EIN ORGANIZATION DEBTOR NONE 8. AMENDMENT (COLLATERAL CHANGE): check only one box. Describe collateral deleted or added, or give entire restated collateral description, or describe collateral assigned. 9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here and enter name of DEBTOR authorizing this Amendment. 9a. ORGANIZATION'S NAME CONSECO BANK, INC C/O CONSECO FINANCE CORP - ALABAMA 19b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME **SUFFIX** 10 OPTIONAL FILER REFERENCE DATA 54316412 **GERALD HICKS - DRR**