



200005230110

Kathy Hill, Skagit County Auditor  
5/23/2000 Page 1 of 1 3:33:33PM

WHEN RECORDED RETURN TO:

CITY BANK  
14807 HWY 99  
PO BOX 97007  
LYNNWOOD, WA 98046-9707

WASHINGTON UCC-2 COUNTY AUDITOR FIXTURE FILING

1. Grantor(s): (last name first, and mailing address(es)) CHOE, KWON SSN: 536-90-4836 CHOE, SU K <sup>sk</sup> SSN: 537-37-5483 OLD SALTS MARKET AND DELI TIN: 1900 SKYLINE WAY ANACORTES, WA 98221	2. Grantee(s)/Assignee/Beneficiary: CITY BANK FINANCIAL CENTER BRANCH 14807 HWY 99 PO BOX 97007 LYNNWOOD, WA 98046-9707	3. Assignee(s) of Secured Party(ies):
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THIS FIXTURE FILING SHALL COVER COLLATERAL THAT IS AFFIXED TO THE FOLLOWING DESCRIBED PROPERTY.

Reference Number: \_\_\_\_\_ Additional on page \_\_\_\_\_  
Short Legal Description: Tract 1, Skyline No 19, According to Pt in V 13,  
of Pts, p 19-21, Records of Skagit County, WA Additional on page \_\_\_\_\_

Assessor's Tax Parcel ID#: 4426-000-001-0007  
Legal Description: TRACT 1, SKYLINE NO. 19, ACCORDING TO THE PLAT RECORDED IN VOLUME 13 OF PLATS, PAGES 19 THROUGH 21, RECORDS OF SKAGIT COUNTY, WASHINGTON.

THIS FIXTURE FILING COVERS THE FOLLOWING DESCRIBED PROPERTY

All Fixtures; whether any of the foregoing is owned now or acquired later; all accessions, additions, replacements, and substitutions relating to any of the foregoing; all records of any kind relating to any of the foregoing; all proceeds relating to any of the foregoing (including insurance, general intangibles, and accounts proceeds), together with the following specifically described property: N/A

4.  The debtor is the record owner.
5. This statement is signed by the Secured Party(ies) instead of the Debtor(s) to perfect a security interest in collateral: (Please check appropriate box)
- (a)  already subject to security interest in another jurisdiction when it was brought into this state, or when the debtor's location was changed to this state, or
  - (b)  which is proceeds of the original collateral described above in which a security interest was perfected, or
  - (c)  as to which the recording has lapsed, or
  - (d)  acquired after a change of name, identity, or corporate structure of the debtor(s).
6. Complete fully if box (d) is checked:  
complete as applicable for (a), (b), and (c):  
Original recording number \_\_\_\_\_  
Office where recorded \_\_\_\_\_  
Former name of debtor(s) \_\_\_\_\_

Dated May 11, 2000

KWON CHOE and SU K<sup>sk</sup> CHOE  
TYPE NAME(S) OF DEBTOR(S) (or assignor(s))

X [Signature]  
SIGNATURE(S) OF DEBTOR(S) (or assignor(s))

CITY BANK B<sub>3</sub>+S<sub>4</sub> v<sub>1</sub>p  
TYPE NAME(S) OF SECURED PARTY(IES) (or assignee(s))

[Signature]  
SIGNATURE(S) OF SECURED PARTY(IES) (or assignee(s))