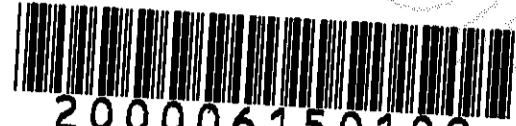


WHEN RECORDED RETURN TO:

Skagit State Bank
301 E FAIRHAVEN AVE
P O BOX 285
BURLINGTON, WA 98233



200006150109
Kathy Hill, Skagit County Auditor
6/15/2000 Page 1 of 1 3:59:11PM

LAND TITLE COMPANY OF SKAGIT COUNTY

PA 93685-E

WASHINGTON UCC-2 COUNTY AUDITOR FIXTURE FILING

1. Grantor(s): (last name first, and mailing address(es))	2. Grantee(s)/Assignee/Beneficiary:	3. Assignee(s) of Secured Party(ies):
GRIMNES, GARY M SSN: [REDACTED] GRIMNES, SUSAN C SSN: [REDACTED] 20505 LAFAYETTE RD BURLINGTON, WA 98233	Skagit State Bank 301 E FAIRHAVEN AVE P O BOX 285 BURLINGTON, WA 98233	

THIS FIXTURE FILING SHALL COVER COLLATERAL THAT IS AFFIXED TO THE FOLLOWING DESCRIBED PROPERTY.

Reference Number: PA-93685-E Additional on page _____

Short Legal Description: Lots 45 & 46, Dewey Beach No. 2 Additional on page _____

Assessor's Tax Parcel ID#: 3901-000-046-0000 (P65038)

Legal Description:

THIS FIXTURE FILING COVERS THE FOLLOWING DESCRIBED PROPERTY

ONE (1) 1969 SAFEWAY 52T / 24 MOBILE HOME (Serial Number 0896); TOGETHER WITH ALL TOOLS, EQUIPMENT, SKIRTING, AWNINGS AND BUILT IN APPLIANCES, 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; LOCATED AT 6014 CENTRAL AVENUE, ANACORTES, WA SITUATED IN SKAGIT COUNTY.

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 _____, 20____.

GARY M GRIMNES and SUSAN C GRIMNES

TYPE NAME(S) OF DEBTOR(S) (or assignor(s))

SIGNATURE(S) OF DEBTOR(S) (or assignor(s))

COPY 1 - COUNTY AUDITOR

Skagit State Bank

TYPE NAME(S) OF SECURED PARTY(IES) (or assignee(s))

SIGNATURE(S) OF SECURED PARTY(IES) (or assignee(s))

FORM APPROVED FOR USE IN THE STATE OF WASHINGTON