



200104060118

, Skagit County Auditor

4/6/2001 Page 1 of 2 2:29:25PM

AFTER RECORDING RETURN TO:

LIEN RESEARCH CORP.
P. O. BOX 449
EVERETT, WA 98206

CLAIM OF LIEN

CANYON CREEK CABINET CO.)
Claimant.)
VS)
JOHN R COX & ASSOCIATES LLC)
(Name of person indebted to claimant)

NOTICE IS HEREBY GIVEN that the person below claims a lien pursuant to chapter 60.04 RCW. In support of this lien the following information is submitted:

1. NAME OF LIEN CLAIMANT: CANYON CREEK CABINET CO.
TELEPHONE NUMBER: 800-228-1830
ADDRESS: 16726 TYE ST SE, MONROE, WA 98272

2. DATE ON WHICH THE CLAIMANT BEGAN TO PERFORM LABOR, PROVIDE PROFESSIONAL SERVICES, SUPPLY MATERIAL OR EQUIPMENT OR THE DATE ON WHICH EMPLOYEE BENEFIT CONTRIBUTIONS BECAME DUE: FEBRUARY 7, 2001

3. NAME OF PERSON INDEBTED TO THE CLAIMANT: JOHN R COX & ASSOCIATES LLC, PO BOX 456, ANACORTES, WA 98221

4. DESCRIPTION OF THE PROPERTY AGAINST WHICH A LIEN IS CLAIMED:

ADDRESS: 902 8TH ST, ANACORTES, WASHINGTON
LEGAL DESCRIPTION: THE EAST HALF OF LOT 19, AND ALL OF LOT 20, BLOCK 21, "CITY OF ANACORTES", ACCORDING TO THE PLAT THEREOF RECORDED IN VOLUME 2 OF PLATS, PAGE 4, RECORDS OF SKAGIT COUNTY, WASHINGTON.
SKAGIT COUNTY ASSESSOR'S TAX PARCEL NO. P54991.

5. NAME OF OWNER OR REPUTED OWNER (if not known state "unknown"): ANACORTES ENTERPRISES LLC, PO BOX 456, ANACORTES, WA 98221

6. THE LAST DATE ON WHICH LABOR WAS PERFORMED; PROFESSIONAL SERVICES WERE FURNISHED; CONTRIBUTIONS TO AN EMPLOYEE BENEFIT PLAN WERE DUE OR MATERIAL, OR EQUIPMENT WAS FURNISHED: FEBRUARY 7, 2001

7. PRINCIPAL AMOUNT FOR WHICH THE LIEN IS CLAIMED: \$520.64, PLUS \$250.00 LIEN FEES, (TOTAL \$770.64), PLUS INTEREST.

8. IF THE CLAIMANT IS THE ASSIGNEE OF THIS CLAIM SO STATE HERE: N/A.


FOR CANYON CREEK CABINET CO., Claimant

16726 TYE ST SE
MONROE, WA 98272
800-228-1830
(Phone Number, Address, City/State of Claimant)

STATE OF WASHINGTON)
) ss
COUNTY OF SNOHOMISH)

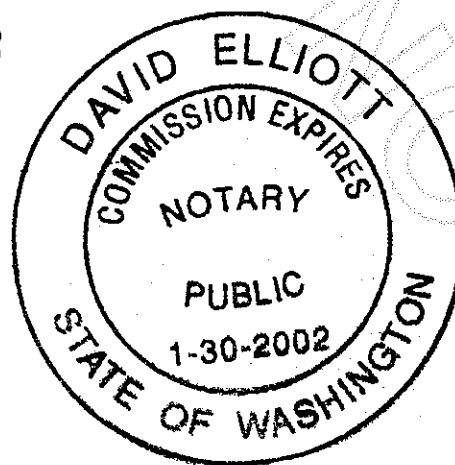
TAMARA OQUIST, being sworn, says: I am the agent of the claimant (or attorney of the claimant, or administrator, representative, or agent for the trustee of an employee benefit plan) above named. I have read the foregoing claim, know the contents thereof, and believe the same to be true and correct and that the claim of lien is not frivolous and is made with reasonable cause, and is not clearly excessive under penalty of perjury.

On this day personally appeared before me, TAMARA OQUIST, to me known to be the individual, described above, and who further, under oath, stated that he/she had read the claim set forth above, and based upon information provided knew the contents thereof, and believed the same to be true and correct, and that the claim was made with reasonable cause and was not frivolous, and further acknowledged to me that he/she signed the same as his/her free and voluntary act and deed for the uses and purposes therein mentioned.

Subscribed and sworn to before me this 29 day of March, 2001.

David Elliott
PRINTED NAME: DAVID ELLIOTT
NOTARY PUBLIC
in and for the State of Washington.
Residing in: MOUNTLAKE TERRACE.
My commission expires: 1/30/2002

order #031604, dated: 3-27-01



200104060118
Skagit County Auditor