When Recorded Return To: FOSTER PEPPER TOOZE LLP 101 SW Main St., 15<sup>th</sup> Floor Portland, OR 97204 Attn: Michael R. Silvey 200308280103 Skagit County Auditor

8/28/2003 Page

1 of

2 9:39AM

WASHINGTON STATE COUNTY AUDITOR
RECORDS INDEXING FORM

(Cover Sheet)



**Document Title** 

FIRST AMERICAN TITLE CO.

UCC-1 Financing Statement Termination 2007-05-120161

ACCOMMODATION RECORDING ONLY

Grantor (Debtor)

11

Sedro-Woolley Lumber. Co.

Grantee (Secured Party)

General Electric Capital Corporation

Legal Description: (Abbreviated) Ptn. SE ¼ and SW ¼ of Sec. 24, Twn. 35 M., Rng. 4 E; Ptn. NW ¼ Sec. 25, Twn. 35 N., Rng. 4 E; and Ptns. Blks. 55, 56 & 57 First Add. to Sedro, V1.3, Pg. 29

Assessor's Property Tax Parcel/Account Number(s):

350425-2-002-0000, 350425-2-005-0106, 350425-2-007-0104, 350425-2-005-0007, 350425-02-007-0005, 350425-0-028-0103, 350425-0-029-0003, 350425-0-030-0000, 350425-0-028-0004, 4150-056-006-0006, 4150-055-020-0000, 4150-055-001-0003, 4150-055-0006-0004, 350424-0-082-0008, 350424-3-005-0006, 350425-2-006-0000, 4150-055-003-0001

Reference Numbers of Documents Assigned or Released:

200203120161, filed 3/12/02

| UCC FINANCING STATEM   |  |   |  |                               |
|--|--|---|--|-------------------------------|
| FOLLOW INSTRUCTIONS (front and back) C<br>A. NAME & PHONE OF CONTACT AT FIL  |  | <del></del>   |  |                               |
| B. SEND ACKNOWLEDGEMENT TO: (No  | ama and Address  |   |  |                               |
| B. SEIND ACKNOWLEDGEMENT TO, (No   | ame and Address)   |   |  |                               |
| CLAS Information S   | ervices  |   |  |                               |
| 1425 Riverpark Driv  | at 1   | j   |  |                               |
| Sacramento, CA 958   | 315  |   |  |                               |
|  |  | 1   |  |                               |
|  |  | THE AROVE S   | PACE IS FOR FILING OFFICE                              | HSE ONLY                      |
| a, INITIAL FINANCING STATEMENT FIL   |  | ηb  | . This FINANCING STATEM                                | MENT AMENDMENT is             |
| 200203120161, filed 3/12/0   | 02   |   | to be filed [for record] (or re<br>REAL ESTATE RECORDS | ecord) in the<br>S.           |
| V TERMINATION: Effectiveness of the  | Financing Statement identified above is  | terminated with respect to security interest(s) o   | f the Secured Party authorizing this I                 | Termination Statement.        |
| <ol> <li>CONTINUATION: Effectiveness of the for the additional period provided by app.</li> </ol>  |  | with respect to security interest(s) of the Secure  | ed Party authorizing this Continuation                 | n Statement is continued      |
|  | The second of th | ddress of assignee in item 7c; and also give na   | me of assignor in item 9.                              | <del></del>                   |
| AMENDMENT (PARTY INFORMATION Also check one of the following three boxes an  | ): This Amendment affects 🔲 Debtor   | or Secured Party of record. Check   |  |                               |
| CHANGE name and/or address: Give   |  |   | iname ADD name: Complet                                | e item 7a or7b, and also item |
| name (if name change) in item 7a or 7b and<br>c. CURRENT RECORD INFORMATION:   | d/or new address (if address change) in item   | 7c to be deleted in item 6s or 6b.  | 7c; also complate items                                |                               |
| 6a. ORGANIZATION'S NAME  |  | <u>.                                    </u>  |  |                               |
| Sedro-Woolley Lumber 6b. INDIVIDUAL'S LAST NAME  | Co.  | FIRST NAME  | MIDDLE NAME  | SUFFIX                        |
|  |  | 11 T 10 T   |  |                               |
|  | <u> </u>   |   |  |                               |
| 7. CHANGED (NEW) OR ADDED INFORM<br>7a. ORGANIZATION'S NAME  | ATION:   |   |  |                               |
| 7a. ORGANIZATION'S NAME  | MATION:  |   |  |                               |
| 7a. ORGANIZATION'S NAME  | MATION:  | FIRST NAME  | MIDDLE NAME  | SUFFIX                        |
| 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME   | MATION:  | FIRST NAME CITY   | MIDDLE NAME STATE POSTAL CODE                          | SUFFIX                        |
| 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME 7c. MAILING ADDRESS  DO'L INFO RE   | MATION:  | CITY  | STATE POSTAL CODE                                      | SUFFIX                        |
| 7b. INDIVIDUAL'S LAST NAME  C. MAILING ADDRESS   |  |   | STATE POSTAL CODE                                      | SUFFIX COUNTRY D#, if any     |
| 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME 7c. MAILING ADDRESS  DD'L INFO RE ORGANIZATION DEBTOR  3. AMENDMENT (COLLATERAL CHANGE  | 7e. TYPE OF ORGANIZATION  E): check only one box.  | 7f. JURISDICTION OF ORGANIZATIO   | STATE POSTAL CODE                                      | SUFFIX COUNTRY D#, if any     |
| 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME 7c. MAILING ADDRESS  DO'L INFO RE ORGANIZATION DEBTOR   | 7e. TYPE OF ORGANIZATION  E): check only one box.  | 7f. JURISDICTION OF ORGANIZATIO   | STATE POSTAL CODE                                      | SUFFIX COUNTRY D#, if any     |
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