

11/23/2004 Page

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(page 1 of 1)

nnis Space Provided to	r Hecorder's Use	
When Recorded Return To: SKAGIT STATE BANK P O BOX	1040 MOUNT VERNON WA 982	73
Document Title(s)		
Grantor(s)		
Grantee(s)		
Legal Description AMENDED SKAGI	T REG AIRPORT BIND SITE PL	AN
Assessor's Property Tax Parcel or Account		
Reference Numbers of Documents Assigne	d'or Released	
UCC-5		
COUNTY AUDITOR		
Change Form		
1. Debtor(s): (last name first, and mailing address(es))	2. Secured Party(les) and address(es):	Assignee(s) of Secured Party(ies) and address(es):
EDDYLINE NORTHWEST LTD	SKAGIT STATE BANK	
15466 ASHTEN RD	P O BOX 1040	
BURLINGTON WA 98233	MOUNT VERNON WA 98273	
DORDINGTON WIT JOZJS		
	No. of the state o	
4. This statement refers to original UCC-2 Dated 9-11-2003	number 200309110077	
5. Number of additional sheets attached:	<del>_</del>	
6. CONTINUATION. The original UCC-2 above is still effective.	between the foregoing Debtor(s) and Secured P	arty(ies) bearing auditors receiving number shown
FULL ASSIGNMENT. All of the Secure to the Assignee(s) whose NAME(S) AN	d Party's rights under the UCC-2 bearing auditors D ADDRESS(ES) APPEAR ABOVE.	eceiving number shown above have been assigned
PARTIAL ASSIGNMENT. The Secure DESCRIBED BELOW have been assign	od Party's rights under the UCC-2 bearing auditoned to the Assignee(s) whose NAME(S) AND ADD	rs receiving number shown above to the property RESS(ES) APPEAR ABOVE.
AMENDMENT. UCC-2 bearing auditors receiving number shown above is amended AS SET FORTH BELOW.		
PARTIAL RELEASE. Secured Party(is shown above.	es) releases the collateral DESCRIBED BELOW i	rom the UCC-2 bearing auditors receiving number
TERMINATION. Secured Party(ies) no	longer claims a security interest under the UCC-2	bearing auditors receiving number shown above.
DESCRIPTION:		and the second s
GRANTOR'S NAME CHANGE T (DEBTOR)	O: DERRER DESIGNS, LTD.	The state of the s
DATED: NOVEMBER 19, 200	)4	
	Land also were an interpretable verse in	
DERRER DESIGNS, LTD.	SKAGIT	STATE BANK
TYPE NAME(S) OF DEBTOR(S) (or assignor(s))	TYPE NAME(S) OF S	SECURED PARTY(IES) (or assignee(s))
SIGNATURE(S) OF DEBTOR(S) (or assignor(s))	SIGNATURE(S) OF I	DEBTOR(S) (or assignee(s))
(Required if amendment)		· · · · · · · · · · · · · · · · · · ·
(moquired if amendificity)		in the second of

(1) ORIGINAL

Bankers Systems, Inc., St. Cloud, MN Form UCC-5-WA 12/17/96