ICC FINANCING STATEMENT DLLOW INSTRUCTIONS (front and back) CAREFULLY		Skadii	5021701 County Audit	2 1
A. NAME & PHONE OF CONTACT AT FILER [optional]	<u>2/</u>	17/2005 Pag	e 1 of	or 3 3:21PM
PEOPLES BANK 1801 RIVERSIDE DRIVE MOUNT VERNON, WA 98273				
	1	end This ell	narcear	
	THE ABO	OVE SPACE IS FO	R FILING OFFICE US	SE ONLY
DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a	or 1b) - do not abbreviate or combine names			
1a. ORGANIZATION'S NAME MARITIME FABRICATIONS, INC.				
R 1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
920 W PEARLE JENSEN WAY	LACONNER	WA	98257	USA
ADD'L INFO RE 11e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR Corporation	11. JURISDICTION OF ORGANIZATION	1 -	ANIZATIONAL ID #, if any 54 449	
ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one of Iza. ORGANIZATION'S NAME	debtor name (2a or 2b) - do not abbreviate or	combine names		
2a. ORGANIZATIONS NAME				
R 25. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
OCZKEWICZ	EDWARD	M.		
. MAILING ADDRESS	СПҮ	STATE	POSTAL CODE	COUNTRY
18268 VALENTINE RD	MOUNT VERNON	WA	98273	USA
d. SEE INSTRUCTIONS ADD'L INFO RE 25. TYPE OF ORGANIZATION ORGANIZATION DEBTOR Individual	24. JURISDICTION OF ORGANIZATION	2g. QRG/	ANIZATIONAL ID#, if any	NON K
SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR	(3/P) - insert only one secured party name	la or 3b)		
3a. ORGANIZATION'S NAME PEOPLES BANK		k Saman en en g		
R 3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
: MAILING ADDRESS	СПУ	STATE	POSTAL CODE	COUNTRY
1801 RIVERSIDE DRIVE	MOUNT VERNON	WA	98273	USA
. This FINANCING STATEMENT covers the following collateral: All Fixtures; whether any of the foregoing is owned now or a to any of the foregoing; all records of any kind relating to any insurance, general intangibles and accounts proceeds).	of the foregoing; all proceeds re	litions, replacen elating to any of	nents, and substitute fithe foregoing (in	utions relating cluding

	1			
ALTERNATIVE DESIGNATION [if applicable]:	LESSEE/LESSOR CONSIGN	NEE/CONSIGNOR BAILEE/BAILO		AG. LIEN NON-UCC FILING
This FINANCING STATEMENT is to be filed ESTATE RECORDS. Attach Addendum	f [for record] (or recorded) in the REAL ————————————————————————————————————	7, Check to REQUEST SEARCH RE	PORT(S) on Debtor(s) [optional] All [Debtor 1 Debtor 2

OCZKEWICZ Inc. MAILING ADDRESS 18268 VALENTINE RD ADD'L INFO RE ORGANIZATION Individual ADD'L INFO RE ORGANIZATION Individual ADDITIONAL SECURED PARTY'S or ASSIGNOR S/P'S NAME - insert only one name (12a or 12b) ASSIGNOR S/P'S NAME Tab. INDIVIDUAL'S LAST NAME MIDDLE NAME	E ONLY
NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT Sp. ORGANIZATION S NAME MIDDLE NAME, SUFFIX	·
See ORGANIZATIONS NAME MARITIME FABRICATIONS, INC. 95. INDIVIDUAL'S LAST NAME INDIPERSANCE IS FOR FILING OFFICE USE ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - Insert only one name (11a or 11b) - do not abbreviate or combine names 11a. ORGANIZATION'S NAME 11b. INDIVIDUAL'S LAST NAME OCZKEWICZ 11c. MAILING ADDRESS ADDITIONAL SECURED PARTY'S or ASSIGNOR S/P'S NAME - Insert only one name (12a or 12b) 12a. ORGANIZATION'S NAME FIRST NAME MIDDLE NAME L. OTY MOUNT VERNON WA 98.273 ADDITIONAL SECURED PARTY'S or ASSIGNOR S/P'S NAME - Insert only one name (12a or 12b) 12a. ORGANIZATION'S NAME FIRST NAME FIRST NAME FIRST NAME - Insert only one name (12a or 12b) 12b. INDIVIDUAL'S LAST NAME FIRST NAME - Insert only one name (12a or 12b) 12c. ORGANIZATION'S NAME FIRST NAME - Insert only one name (12a or 12b) 12a. ORGANIZATION'S NAME FIRST NAME - Insert only one name (12a or 12b) 12b. INDIVIDUAL'S LAST NAME - Insert only one name (12a or 12b) 12b. INDIVIDUAL'S LAST NAME - Insert only one name (12a or 12b) 12c. MAILING ADDRESS CITY STATE POSTAL CODE 15the FINANCING STATEMENT COVERS - Impriet to be cut or assessmented of the insert only one name (12a or 12b) 15the FINANCING STATEMENT COVERS - Impriet to be cut or assessmented of the insert only one name (12a or 12b) 15the FINANCING STATEMENT COVERS - Impriet to be cut or assessmented of the insert only one name (15a or 12b) 15the FINANCING STATEMENT COVERS - Impriet to be cut or assessmented of the insert only one name (15a or 12b) 15the FINANCING STATEMENT COVERS - Impriet to be cut or assessmented - Insert only one name (15a or 12b) 15the FINANCING STATEMENT COVERS - Impriet to be cut or assessmented - Insert only one name (15a or 12b) 15the FINANCING STATEMENT COVERS - Impriet to be cut or assessmented - Insert only one name (15a or 12b) 15the FINANCING STATEMENT COVERS - Impriet to be cut or assessmented - Insert only one name (15a or 12b) 15the FINANCING STATEMENT COVERS - INSERT COVERS - INSERT COVERS - INSERT COVERS - INSERT COVE	
D. MISCELLANEOUS: THE ABOVE SPACE IS FOR FILING OFFICE USE 1. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (11a or 11b) - do not abbreviate or combine names 11a. ORGANIZATION'S NAME THE ABOVE SPACE IS FOR FILING OFFICE USE 11b. INDIVIDUAL'S LAST NAME OCZICEWICZ Individual OCZICEWICZ Individual ORGANIZATION ADDIL INFO RE IT ST NAME ORGANIZATION ORGANIZATION Individual DEBTOR TABLE POSTAL CODE MOUNT VERNON WA 982.73 MOUNT VERNON WA 982.73 11g. ORGANIZATIONAL ID #, if sny ORGANIZATION Individual DEBTOR TO INDIVIDUAL'S LAST NAME FIRST NAME IT JURISDICTION OF ORGANIZATION TO INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME TO INDIVIDUAL'S LAST NA	,
B. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME. SUPFIX THE ABOVE SPACE IS FOR FILING OFFICE USE 11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (11a or 11b) - do not abbreviate or combine names 11a. ORGANIZATION'S NAME 11b. INDIVIDUAL'S LAST NAME OCZKEWICZ 11c. MAILING ADDRESS 18268 VALENTINE RD 10. SEE INSTRUCTIONS ADDITIONAL DEDTOR'S EXACT FULL LEGAL NAME - insert only one name (11a or 11b) - do not abbreviate or combine names 11b. INDIVIDUAL'S LAST NAME OCZKEWICZ 11c. MAILING ADDRESS 18268 VALENTINE RD 10. SEE INSTRUCTIONS ADDITIONAL DE ORGANIZATION Individual Indi	•
THE ABOVE SPACE IS FOR FILING OFFICE USE 11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (11a or 11b) - do not abbreviate or combine names 11a. ORGANIZATION'S NAME 11b. INDIVIDUAL'S LAST NAME OCZKEWICZ 11c. MAILING ADDRESS 11c. TYPE OF ORGANIZATION ORGANIZATION ORGANIZATION ORGANIZATION Individual 11c. TYPE OF ORGANIZATION ORGANIZATION Individual 11d. SEE INSTRUCTIONS ORGANIZATION ORGANIZATION ORGANIZATION ORGANIZATION Individual 11d. ORGANIZATION SAME 11d. INSTRUCTIONS ORGANIZATION SAME 11d. TYPE OF ORGANIZATION Individual 11d. ORGANIZATION SAME 11d. INSTRUCTIONS ORGANIZATION SAME 11d. INSTRUCTIONS ORGANIZATION SAME 11d. INSTRUCTIONS ORGANIZATION SAME 11d. INSTRUCTIONS ORGANIZATION SAME 11d. INSTRUCTION SAME 11d. I	•
THE ABOVE SPACE IS FOR FILING OFFICE USE 11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (11a or 11b) - do not abbreviate or combine names 11a. ORGANIZATION'S NAME 11b. INDIVIDUAL'S LAST NAME OCZKEWICZ 11c. MAILING ADDRESS 11c. TYPE OF ORGANIZATION ORGANIZATION ORGANIZATION ORGANIZATION Individual 11c. TYPE OF ORGANIZATION ORGANIZATION Individual 11d. SEE INSTRUCTIONS ORGANIZATION ORGANIZATION ORGANIZATION ORGANIZATION Individual 11d. ORGANIZATION SAME 11d. INSTRUCTIONS ORGANIZATION SAME 11d. TYPE OF ORGANIZATION Individual 11d. ORGANIZATION SAME 11d. INSTRUCTIONS ORGANIZATION SAME 11d. INSTRUCTIONS ORGANIZATION SAME 11d. INSTRUCTIONS ORGANIZATION SAME 11d. INSTRUCTIONS ORGANIZATION SAME 11d. INSTRUCTION SAME 11d. I	•
1. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (11a or 11b) - do not abbreviate or combine names 11a. ORGANIZATIONS NAME 11b. INDIVIDUAL'S LAST NAME OCZKEWICZ 11c. MAILING ADDRESS 18268 VALENTINE RD ORGANIZATION ORGANIZATION ORGANIZATION DEBTOR ADD'L INFO RE 11e TYPE OF ORGANIZATION 11f JURISDICTION OF ORGANIZATION 11g, ORGANIZATION 11g, ORGANIZATION 11g, ORGANIZATION 11g, ORGANIZATION 11g, ORGANIZATION 11g, ORGANIZATION 12a, ORGANIZATION S NAME 12b. INDIVIDUAL'S LAST NAME 12c. MAILING ADDRESS CITY STATE POSTAL CODE ASSIGNOR S/P'S NAME - insert only one name (12a or 12b) 12a. ORGANIZATIONS NAME 12b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME ORGANIZATION 11g, ORGANIZATION	•
1. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (11a or 11b) - do not abbreviate or combine names 11a. ORGANIZATIONS NAME 11b. INDIVIDUAL'S LAST NAME OCZKEWICZ 11c. MAILING ADDRESS 18268 VALENTINE RD ORGANIZATION ORGANIZATION ORGANIZATION DEBTOR ADD'L INFO RE 11e TYPE OF ORGANIZATION 11f JURISDICTION OF ORGANIZATION 11g, ORGANIZATION 11g, ORGANIZATION 11g, ORGANIZATION 11g, ORGANIZATION 11g, ORGANIZATION 11g, ORGANIZATION 12a, ORGANIZATION S NAME 12b. INDIVIDUAL'S LAST NAME 12c. MAILING ADDRESS CITY STATE POSTAL CODE ASSIGNOR S/P'S NAME - insert only one name (12a or 12b) 12a. ORGANIZATIONS NAME 12b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME ORGANIZATION 11g, ORGANIZATION	,
1. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (11a or 11b) - do not abbreviate or combine names 11a. ORGANIZATIONS NAME 11b. INDIVIDUAL'S LAST NAME OCZKEWICZ 11c. MAILING ADDRESS 18268 VALENTINE RD ORGANIZATION ORGANIZATION ORGANIZATION DEBTOR ADD'L INFO RE 11e TYPE OF ORGANIZATION 11f JURISDICTION OF ORGANIZATION 11g, ORGANIZATION 11g, ORGANIZATION 11g, ORGANIZATION 11g, ORGANIZATION 11g, ORGANIZATION 11g, ORGANIZATION 12a, ORGANIZATION S NAME 12b. INDIVIDUAL'S LAST NAME 12c. MAILING ADDRESS CITY STATE POSTAL CODE ASSIGNOR S/P'S NAME - insert only one name (12a or 12b) 12a. ORGANIZATIONS NAME 12b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME ORGANIZATION 11g, ORGANIZATION	•
The individual state in the in	SUFFIX
OCZKEWICZ 1c. MAILING ADDRESS 1c. MAILING ADDRESS 1d. SEE INSTRUCTIONS	SUFFIX
OCZKEWICZ 1c. MAILING ADDRESS 1c. MAILING ADDRESS 1d. SEE INSTRUCTIONS	SUFFIX
1c. MAILING ADDRESS 18268 VALENTINE RD ADD'L INFO RE ORGANIZATION Individual CREE INSTRUCTIONS ORGANIZATION DEBTOR ADD'L INFO RE ORGANIZATION Individual CREE INSTRUCTIONS ORGANIZATION Individual CREE INSTRUCTIONS ORGANIZATION INDIVIDUAL SECURED PARTY'S OF ASSIGNOR S/P'S NAME - insert only one name (12a or 12b) 12a. ORGANIZATION'S NAME 12b. INDIVIDUAL'S LAST NAME FIRST NAME FIRST NAME MIDDLE NAME CITY STATE POSTAL CODE ORGANIZATIONAL ID #, if any ORGANIZATION OF ORGANIZATION	
ADDITIONS ADDITIONS ADDITIONS The type of Organization 11e. TYPE of Organization 11f. JURISDICTION OF ORganization 11g. Organization	COUNTR
ORGANIZATION DEBTOR Individual 2. ADDITIONAL SECURED PARTY'S or ASSIGNOR S/P'S NAME - insert only one name (12a or 12b) 12a. ORGANIZATION'S NAME 12b. INDIVIDUAL'S LAST NAME MIDDLE NAME 2c. MAILING ADDRESS CITY STATE POSTAL CODE 3. This FINANCING STATEMENT covers timber to be cut or collateral, or is filled as a collateral, or is filled as a 4. Description of real estate:	USA
ADDITIONAL SECURED PARTY'S or ASSIGNOR S/P'S NAME - insert only one name (12a or 12b) 12a. ORGANIZATION'S NAME 12b. INDIVIDUAL'S LAST NAME 12c. MAILING ADDRESS CITY STATE POSTAL CODE 3. This FINANCING STATEMENT covers timber to be cut or collateral, or is filled as a collateral, or is filled as a collateral, or is filled as a collateral. 4. Description of real estate:	
12a. ORGANIZATION'S NAME 12b. INDIVIDUAL'S LAST NAME 12c. MAILING ADDRESS CITY STATE POSTAL CODE 3. This FINANCING STATEMENT covers timber to be cut or collateral, or is filled as a collateral, or is filled as a collateral. 4. Description of real estate:	X
12b. INDIVIDUAL'S LAST NAME 12c. MAILING ADDRESS CITY STATE POSTAL CODE 3. This FINANCING STATEMENT covers timber to be cut or collateral, or is filled as a fixture filing. 4. Description of real estate:	
2c. MAILING ADDRESS CITY STATE POSTAL CODE 3. This FINANCING STATEMENT covers timber to be cut or collateral, or is filled as a fixture filling. 4. Description of real estate:	
3. This FINANCING STATEMENT covers timber to be cut or collateral, or is filled as a fixture filing. 4. Description of real estate:	SUFFIX
3. This FINANCING STATEMENT covers timber to be cut or collateral, or is filled as a fixture filing. 4. Description of real estate:	
collateral, or is filled as a fixture filing. 4. Description of real estate:	COUNTR
5. Name and address of a RECORD OWNER of above-described real estate 2/17/2005 Page 2 of 3 3:2	21 PM
(if Debtor does not have a record interest):	/ ja
PORT OF SKAGIT COUNTY	
17. Check <u>only</u> if applicable and check <u>only</u> one box. Debtor is a Trust or Trustee acting with respect to property held in trust or Dec	
18. Check only if applicable and check only one box.	edent's F
To. Check dilly it applicable and check dilly one cox.	cedent's E
Debtor is a TRANSMITTING UTILITY	cede

Exhibit - A

DESCRIPTION:

PARCEL "A":

That portion of Government Lot 5, Section 25, Township 34 North, Range 2 East, W.M., described as follows:

Beginning at the Southeast corner of Section 25;

thence North 0°00'15" West a distance of 1,330.00 feet to a 1½ inch pipe marking the sixteenth quarter;

thence North 89°47'55" West a distance of 1,822.56 feet to an iron pipe;

thence South 2°11'29" West a distance of 442.04 feet;

thence South 89°47'55" East a distance of 84.72 feet to the true point of beginning of this property description;

thence continuing South 89°47'55" East a distance of 115.00 feet;

thence South 2°12'25" West along an existing chain link fence a distance of 85.00 feet;

thence North 89°47'55" West a distance of 115.00 feet;

thence North 2°12'25" East a distance of 85.00 feet to the true point of beginning.

Situate in the County of Skagit, State of Washington.

PARCEL "B":

That portion of Government Lot 5, Section 25, Township 34 North, Range 2 East, W.M., described as follows:

Beginning at the Southeast corner of Section 25;

thence North 0°00'15" West a distance of 1,330.00 feet to a 1½ inch pipe marking the sixteenth quarter;

thence North 89°47'55" West a distance of 1,822.56 feet to an iron pipe;

thence South 2°11'29" West a distance of 442.04 feet;

thence South 89°47'55" East a distance of 199.72 feet to the true point of beginning of this property description;

thence North 2°12'25" East, along the East line of that certain lease to Roberts Company in 1985, a distance of 345.84 feet to the Northeast corner of the Roberts Lease;

thence South 89°47'55" East a distance of 221.10 feet to an existing fence;

thence South 2°2'29" West, along said fence, a distance of 492.85 feet;

thence North 89°47'55" West a distance of 221.09 feet to a point which bears South 2°12'25" West from the true point of beginning;

thence North 2°12'25" East a distance of 147.01 feet to the true point of beginning.

Situate in the County of Skagit, State of Washington.

200502170121 Skagit County Auditor

2/17/2005 Page

3 of

3:21PM