

# UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY



200503140052

Skagit County Auditor

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<b>A. NAME &amp; PHONE OF CONTACT AT FILER (optional)</b> Diligenz, Inc. 1-800-858-5294
<b>B. SEND ACKNOWLEDGMENT TO: (Name and Address)</b> 12228599 Diligenz, Inc. 6500 Harbour Heights Pkwy, Suite 400 Mukilteo, WA 98275
Filed In: Washington Skagit

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE # 200006080076 6/8/2000	1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. <input checked="" type="checkbox"/>
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2.  **TERMINATION:** Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement.

3.  **CONTINUATION:** Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law.

4.  **ASSIGNMENT (full or partial):** Give name of assignee in item 7a or 7b and address of assignee in item 7c; and also give name of assignor in item 9.

5. **AMENDMENT (PARTY INFORMATION):** This Amendment affects:  Debtor or  Secured Party of record. Check only one of these two boxes.  
Also check one of the following three boxes and provide appropriate information in items 6 and/or 7.  
 CHANGE name and/or address: Please refer to the detailed instructions in regards to changing the name/address of a party.  DELETE name: Give record name to be deleted in item 6a or 6b.  ADD name: Complete item 7a or 7b, and also item 7c; also complete items 7e-7g (if applicable).

6. **CURRENT RECORD INFORMATION:**

6a. ORGANIZATION'S NAME Smith and Morrison Farms, L.L.C.	FIRST NAME	MIDDLE NAME	SUFFIX
OR 6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

7. **CHANGED (NEW) OR ADDED INFORMATION:**

7a. ORGANIZATION'S NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
OR 7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
7d. SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if any

8. **AMENDMENT (COLLATERAL CHANGE):** check only one box.  
Describe collateral  deleted or  added, or give entire  restated collateral description, or describe collateral  assigned.

Legal description: The SW1/4SW1/4 of Section 5, Township 33 North, Range 4 East, W.M., EXCEPT that portion of said property described as follows: Beginning at a point on the West line of said Section 5 which bears North 1degree 30'00" East 1,120.77 feet from the Southwest corner of said Section 5; thence South 88 degrees 30'00" East a distance of 30 feet to the East right of way line of PSH No. 99, said point being the true point of beginning; thence South 88 degrees 30'00" East a distance of 208.71 feet; thence North 1 degrees 30'00" East parallel with the West line of said Section, a distance of 417.42 feet; thence North 88 degrees 30'00" West a distance of 208.71 feet to the East right of way line of PSH No. 99; thence South 1 degrees 30'00" West along said East right of way line 417.42 feet to the true point of beginning, EXCEPT that portion conveyed to the State of Washington by deed recorded December 15, 1971, under Auditor's No. 761886. Situate in the County of Skagit, State of Washington.

9. **NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT** (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here  and enter name of DEBTOR authorizing this Amendment.

9a. ORGANIZATION'S NAME Northwest Farm Credit Services, PCA	FIRST NAME	MIDDLE NAME	SUFFIX
OR 9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

10. **OPTIONAL FILER REFERENCE DATA**  
065-654759-601 12228599