

AFTER RECORDING RETURN TO:

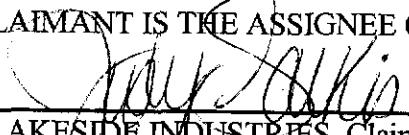
LIEN RESEARCH CORP.  
P. O. BOX 148  
MARYSVILLE, WA 98270

**CLAIM OF LIEN**

LAKESIDE INDUSTRIES  
Claimant.  
VS  
G G EXCAVATING, INC  
(Name of person indebted to claimant)

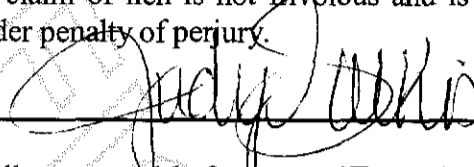
NOTICE IS HEREBY GIVEN that the person below claims a lien pursuant to chapter 60.04 RCW. In support of this lien the following information is submitted:

1. NAME OF LIEN CLAIMANT: LAKESIDE INDUSTRIES  
TELEPHONE NUMBER: (425) 313-2612  
ADDRESS: P.O. BOX 7016, ISSAQUAH, WA. 98027
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: JULY 9, 2004
3. NAME OF PERSON INDEBTED TO THE CLAIMANT: G G EXCAVATING, INC, 9669 PADILLA HEIGHTS RD, ANACORTES, WA. 98221
4. DESCRIPTION OF THE PROPERTY AGAINST WHICH A LIEN IS CLAIMED:  
ADDRESS: PORTALIS OAKES AVE/CHANNEL MARKER LANE, ANACORTES, WA.  
LEGAL DESCRIPTION: UNITS 9, 10, 11, 12, 13, 14, 15, 16, 18 AND 19 PORTALIS ISLAND HOMES CONDOMINIUM, ACCORDING TO THE PLAT RECORDED UNDER AUDITOR'S FILE NO. 200412080101 & DENTION POND, AKA-LOT 2, CITY OF ANACORTES SHORT PLA NO. ANA-04-005, AS RECORDED UNDER AUDITOR'S FILE NO. 200411030031, BEING A PORTION OF THE SOUTHEAST QUARTER OF THE SOUTHWEST QUARTER OF SECTION 22, TOWNSHIP 35 NORTH, RANGE 1 EAST, W.M.  
SKAGIT COUNTY ASSESSOR'S TAX PARCEL NO. P31655, P122164, P122165, P122166, P122167, P122168, P122169, P122170, P122171, P122173 & P122174
5. NAME OF OWNER OR REPUTED OWNER (if not known state "unknown"):  
496404 WASHINGTON, INC, 1004 COMMERCIAL AVE, ANACORTES, WA. 98221 / 496404 WASHINGTON, INC 1515 CAVANAUGH PL NW CALGARY, ALBERTA, CANADA T2L 0M8 / PORTALIS LLC 1004 COMMERCIAL AVE, PMB 109 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: OCTOBER 3, 2005
7. PRINCIPAL AMOUNT FOR WHICH THE LIEN IS CLAIMED: \$7,450.00 PLUS APPLICABLE LIEN FEES &/OR ATTORNEY'S FEES, &/OR, PLUS INTEREST.
8. IF THE CLAIMANT IS THE ASSIGNEE OF THIS CLAIM SO STATE HERE: N/A.

  
\_\_\_\_\_  
For, LAKESIDE INDUSTRIES, Claimant  
P.O. BOX 7016  
ISSAQUAH, WA. 98027  
(425) 313-2612

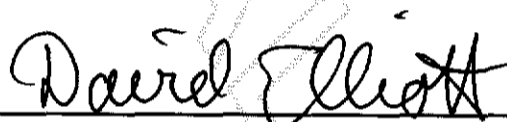
STATE OF WASHINGTON )  
 ) ss  
COUNTY OF SNOHOMISH )

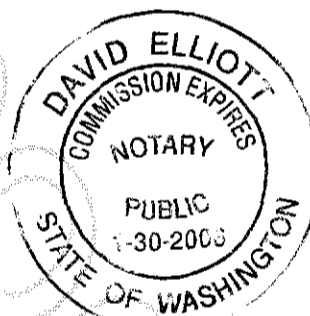
JUDY SARKIS, being sworn, says: I am the agent of the claimant (or attorney of the claimant, or administrator, representative, or agent for the trustee of an employee benefit plan) above named. I have read the foregoing claim, know the contents thereof, and believe the same to be true and correct and 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, JUDY SARKIS, 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 19 day of October, 2005

  
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PRINTED NAME: DAVID ELLIOTT  
NOTARY PUBLIC  
in and for the State of Washington.  
Residing in: EVERETT  
My commission expires: 1/30/2006



Order #05-101001, dated: 10/12/2005



200510240026  
Skagit County Auditor