[redacted]

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

200905080104
Skagit County Auditor
5/8/2009 Page 1 of 1 1:00PM

A. NAME & PHONE OF CONTACT AT FILER [optional]
LOAN SERVICING 800-775-8015

B. SEND ACKNOWLEDGMENT TO: (Name and Address)
FIRST MUTUAL BANK
PO BOX 1647
BELLEVUE, WA 98009-1647

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME

OR

1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
GOLDSTEIN	CHRIS		

1c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
3607 MALLAND CT	ANACORTES	WA	98221	US

1d. TAX ID #: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION	1g. ORGANIZATIONAL ID #, if any
				☐ NONE

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME

OR

2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
GOLDSTEIN	TERESA		

2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
3607 MALLAND CT	ANACORTES	WA	98221	US

2d. TAX ID #: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any
				☐ NONE

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME FIRST MUTUAL BANK Q. M. 5-7-2009

OR

3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

3c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
PO BOX 1647	BELLEVUE	WA	98009-1647	US

4. This FINANCING STATEMENT covers the following collateral:

SPA

PARCEL ID: P118712

ABBREVIATED LEGAL: LT 7, MALLAND MEADOWS PLAT, FILE NO. 200112260185, SKAGIT CO., WA.

LEGAL: LOT 7, MALLAND MEADOWS PLAT, ACCORDING TO THE PLAT THEREOF, RECORDED UNDER AUDITOR'S FILE NUMBER 200112260185, RECORDS OF SKAGIT COUNTY, WASHINGTON.

SITUATE IN THE COUNTY OF SKAGIT, STATE OF WASHINGTON.

FIXTURE FILING ☒

ADDRESS: 3607 MALLAND CT, ANACORTES, WA 98221.

5. ALTERNATIVE DESIGNATION [if applicable]: ☐ LESSEE/LESSOR ☐ CONSIGNEE/CONSIGNOR ☐ BAILEE/BAILOR ☐ SELLER/BUYER ☐ AG. LIEN ☐ NON-UCC FILING

6. ☒ This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. Attach Addendum [if applicable]

7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE] [optional] ☐ All Debtors ☐ Debtor 1 ☐ Debtor 2

8. OPTIONAL FILER REFERENCE DATA
GOLDSTEIN, C, 051-114818-06

$1.42 Skagit, WA

FILING OFFICE COPY — NATIONAL UCC FINANCING STATEMENT (FORM UCC1) (REV. 07/29/98)