

**UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY



201003150058

Skagit County Auditor

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|  |  |
|--|--|
| A. NAME & PHONE OF CONTACT AT FILER [optional]<br>Corporation Service Company 1-800-858-5294   |  |
| B. SEND ACKNOWLEDGMENT TO: (Name and Address)<br><br>48706077 - 305020<br><br>Corporation Service Company<br>801 Adlai Stevenson Drive<br>Springfield, IL 62703<br><br>Filed In: Washington Skagit |  |

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

|  |                                   |                                   |  |  |                |
|--|-----------------------------------|-----------------------------------|--|--|----------------|
| 1. DEBTOR'S EXACT FULL LEGAL NAME - insert only <u>one</u> debtor name (1a or 1b) - do not abbreviate or combine names |                                   |                                   |  |  |                |
| 1a. ORGANIZATION'S NAME<br>NIELSEN BROTHERS, INC.  |                                   |                                   |  |  |                |
| OR   | 1b. INDIVIDUAL'S LAST NAME        |                                   | FIRST NAME                             | MIDDLE NAME  | SUFFIX         |
| 1c. MAILING ADDRESS<br>100 PINE STREET   |                                   | CITY<br>BELLINGHAM                | STATE<br>WA                            | POSTAL CODE<br>98225   | COUNTRY<br>USA |
| 1d. SEE INSTRUCTIONS   | ADD'L INFO RE ORGANIZATION DEBTOR | 1e. TYPE OF ORGANIZATION<br>Corp. | 1f. JURISDICTION OF ORGANIZATION<br>WA | 1g. ORGANIZATIONAL ID #, if any<br>601164240 <input type="checkbox"/> NONE |                |

|   |                                   |                          |                                  |   |         |
|---|-----------------------------------|--------------------------|----------------------------------|---|---------|
| 2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only <u>one</u> 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  |
| 2c. MAILING ADDRESS   |                                   | CITY                     | STATE                            | POSTAL CODE   | COUNTRY |
| 2d. SEE INSTRUCTIONS  | ADD'L INFO RE ORGANIZATION DEBTOR | 2e. TYPE OF ORGANIZATION | 2f. JURISDICTION OF ORGANIZATION | 2g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE |         |

|  |                            |                    |             |                      |                |
|--|----------------------------|--------------------|-------------|----------------------|----------------|
| 3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only <u>one</u> secured party name (3a or 3b) |                            |                    |             |                      |                |
| 3a. ORGANIZATION'S NAME<br>Whidbey Island Bank   |                            |                    |             |                      |                |
| OR   | 3b. INDIVIDUAL'S LAST NAME |                    | FIRST NAME  | MIDDLE NAME          | SUFFIX         |
| 3c. MAILING ADDRESS<br>PO Box 1589   |                            | CITY<br>Oak Harbor | STATE<br>WA | POSTAL CODE<br>98277 | COUNTRY<br>USA |

4. This FINANCING STATEMENT covers the following collateral:  
All Timber located at parcel #340222-4-004-0000 & 340222-4-002-0002 in Skagit County.

Abbreviated Legal: Section 22, Township 34, Range 2: PTN N 1/2, SW 1/4

SEE ATTACHED EXHIBIT 'A'

|   |   |                     |               |              |          |                |
|---|---|---------------------|---------------|--------------|----------|----------------|
| 5. ALTERNATIVE DESIGNATION (if applicable):   | LESSEE/LESSOR   | CONSIGNEE/CONSIGNOR | BAILEE/BAILOR | SELLER/BUYER | AG. LIEN | NON-UCC FILING |
| 6. <input checked="" type="checkbox"/> 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) (OPTIONAL FEE) (optional) |                     | All Debtors   |              | Debtor 1 | Debtor 2       |
| 8. OPTIONAL FILER REFERENCE DATA<br>NIELSEN BROTHERS, INC.  |   |                     |               |              |          |                |

48706077

**EXHIBIT 'A'**

THE NORTHWEST 1/4 OF THE SOUTHEAST 1/4 AND THE SOUTHWEST 1/4 OF THE NORTHEAST 1/4 OF THE SOUTHEAST 1/4 OF SECTION 22, TOWNSHIP 34 NORTH, RANGE 2 EAST, W.M.A EXCEPT THAT PORTION CONVEYED TO THE COUNTY OF SKAGIT FOR ROADS OVER THE NORTH 20 FEET THEREOF, ON JUNE 23, 1932, UNDER AUDITOR'S FILE NO. 251325.

SITUATE IN THE COUNTY OF SKAGIT, STATE OF WASHINGTON.



201003150058  
Skagit County Auditor