

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS



201504070051

Skagit County Auditor

\$75.00

4/7/2015 Page

1 of

4 8:50AM

A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-800-858-5294	
B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscinfo.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address) 98001638 - 305470 Corporation Service Company 801 Adlai Stevenson Drive Springfield, IL 62703 Filed in: Washington (Skagit)	

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here ☐ and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME RUSS BORNEMAN, D.D.S., P.S.					
OR	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
1c. MAILING ADDRESS	1218 29TH ST	CITY ANACORTES	STATE WA	POSTAL CODE 98221	COUNTRY USA

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here ☐ and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME					
OR	2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME Heritage Bank					
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
3c. MAILING ADDRESS	201 5th Ave SW	CITY Olympia	STATE WA	POSTAL CODE 98501	COUNTRY USA

4. COLLATERAL: This financing statement covers the following collateral:

One (1) Cerec 3 including Cerec 3 acquisition unit and Cerec 3 milling unit; One (1) Sirona Galileos Compact Cone Beam Xray; Cerec AC' w/Omnicaam with Cerec MCXL Milling Machine

Abbreviated legal: Ptn SE 1/4 Of SE 1/4, 24-35-1 E W.M.

Parcel Number: 350124-4-112-0005 PROPERTY I.D. NO.: P31890

5. Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is <input type="checkbox"/> held in a Trust (see UCC1Ad, item 17 and Instructions) <input type="checkbox"/> being administered by a Decedent's Personal Representative	
6a. Check <u>only</u> if applicable and check <u>only</u> one box: <input type="checkbox"/> Public-Finance Transaction <input type="checkbox"/> Manufactured-Home Transaction <input type="checkbox"/> A Debtor is a Transmitting Utility	
6b. Check <u>only</u> if applicable and check <u>only</u> one box: <input type="checkbox"/> Agricultural Lien <input type="checkbox"/> Non-UCC Filing	
7. ALTERNATIVE DESIGNATION (if applicable): <input type="checkbox"/> Lessee/Lessor <input type="checkbox"/> Consignee/Consignor <input type="checkbox"/> Seller/Buyer <input type="checkbox"/> Bailee/Bailor <input type="checkbox"/> Licensee/Licenser	
8. OPTIONAL FILER REFERENCE DATA: BORNEMAN XXX50860	

98001638

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here ☐

9a. ORGANIZATION'S NAME

RUSS BORNEMAN, D.D.S., P.S.

OR

9b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c

10a. ORGANIZATION'S NAME

OR

10b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

10c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

11. ☐ ADDITIONAL SECURED PARTY'S NAME or ☐ ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

11a. ORGANIZATION'S NAME

OR

11b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

11c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):

13. ☐ This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)

14. This FINANCING STATEMENT:

☐ covers timber to be cut

☐ covers as-extracted collateral

☐ is filed as a fixture filing

15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):

SOUND HEALTH L.L.C.
1218 29TH ST
ANACORTES WA 98221

16. Description of real estate:

17. MISCELLANEOUS:

That portion of the Southeast 1/4 of the Southeast 1/4 of Section 24, Township 35 North, Range 1 East, W.M., described as follows:

Beginning at a point on the South line of said Section, 640.2 feet West of the Southeast corner of said Section;
thence North to the North line of 29th Street produced, and to the true point of beginning;
thence North 110 feet;
thence West parallel to the North line of 29th Street, produced 150 feet;
thence South 110 feet to the North line of said 29th Street produced;
thence East along the North line of 29th Street produced 150 feet to the true point of beginning,

EXCEPT that portion of said premises, if any, lying within the boundaries of existing streets.

Situate in the City of Anacortes, County of Skagit, State of Washington.

That portion of the Southeast 1/4 of the Southeast 1/4 of Section 24, Township 35 North, Range 1 East, W.M., described as follows:

Beginning at a point on the South line of said Section, 640.2 feet West of the Southeast corner of said Section;
thence North to the North line of 29th Street produced, and to the true point of beginning;
thence North 110 feet;
thence West parallel to the North line of 29th Street, produced 150 feet;
thence South 110 feet to the North line of said 29th Street produced;
thence East along the North line of 29th Street produced 150 feet to the true point of beginning,

EXCEPT that portion of said premises, if any, lying within the boundaries of existing streets.

Situate in the City of Anacortes, County of Skagit, State of Washington.