

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT SUBMITTER (optional) CSC 1-800-858-5294	
B. E-MAIL CONTACT AT SUBMITTER (optional) SPRFiling@cscglobal.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	
2944 52632 CSC 801 Adlai Stevenson Drive Springfield, IL 62703	Filed In: Washington (Skagit)
SEE BELOW FOR SECURED PARTY CONTACT INFORMATION	

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			
OR			
1b. INDIVIDUAL'S SURNAME BRENNEISE	FIRST PERSONAL NAME HARVEY	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS 1074 NORTH FRUITDALE ROAD	CITY SEDRO-WOOLLEY	STATE WA	POSTAL CODE 98284
			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 STRONG	FIRST PERSONAL NAME SHAWN	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS 1074 NORTH FRUITDALE ROAD	CITY SEDRO-WOOLLEY	STATE WA	POSTAL CODE 98284
			COUNTRY USA

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 1st Security Bank of Washington			
OR			
3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS P. O. Box 97000	CITY Lynnwood	STATE WA	POSTAL CODE 98046
			COUNTRY USA

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

APN: P39393/350518-4-013-0100

LEGAL: THAT PORTION OF THE NORTHEAST QUARTER OF THE NORTHWEST 1/4 OF THE SOUTHEAST QUARTER OF

SECTION 18, TOWNSHIP 35 NORTH, RANGE 5 EAST, W.M., DESCRIBED AS FOLLOWS:

COMMENCING AT THE NORTHEAST CORNER OF SAID SUBDIVISION;

THENCE SOUTH 1 31*45" EAST ALONG THE EAST LINE THEREOF 144.50 FEET;

THENCE SOUTH 89 47W WEST 21.41 FEET TO THE WESTERLY MARGIN OF THE FRUITDALE COUNTY ROAD, SAID POINT BEING THE TRUE POINT OF BEGINNING;

THENCE CONTINUE SOUTH 89 47'00 WEST 120 FEET;

THENCE NORTH 1°W WEST PARALLEL WITH SAID WESTERLY MARGIN OF THE FRUITDALE COUNTY ROAD 76 FEET;

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions) being administered by a Decedent's Personal Representative

6a. Check only if applicable and check only one box:

Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility

6b. Check only if applicable and check only one box:

Agricultural Lien Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailor Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA: 5152901690 BRENNEISE (DEBTOR)

2944 52632

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	
OR	
9b. INDIVIDUAL'S SURNAME	
BRENNEISE	
FIRST PERSONAL NAME	
HARVEY	
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

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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

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):
 THENCE NORTH 89 47'00" EAST 120 FEET MORE OR LESS, TO THE WESTERLY MARGIN OF SAID FRUITDALE COUNTY ROAD;
 THENCE SOUTH 1*34'30" EAST ALONG SAID WESTERLY MARGIN FOR 76 FEET, MORE OR LESS, TO THE TRUE POINT OF BEGINNING;
 EXCEPT THE EAST 10 FEET AS CONVEYED TO THE CITY OF SEDRO WOOLLEY, A MUNICIPAL CORPORATION IN SKAGIT COUNTY, STATE OF WASHINGTON, AS RECORDED UNDER SKAGIT COUNTY AUDITOR'S FILE NO.

<p>13. <input checked="" type="checkbox"/> This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)</p> <p>15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):</p>	<p>14. This FINANCING STATEMENT: <input type="checkbox"/> covers timber to be cut <input type="checkbox"/> covers as-extracted collateral <input checked="" type="checkbox"/> is filed as a fixture filing</p> <p>16. Description of real estate: THAT PORTION OF THE NORTHEAST QUARTER OF THE NORTHWEST 1/4 OF THE SOUTHEAST QUARTER OF SECTION 18, TOWNSHIP 35 NORTH, RANGE 5 EAST, W.M., DESCRIBED AS FOLLOWS: COMMENCING AT THE NORTHEAST CORNER OF SAID SUBDIVISION; THENCE SOUTH 1 31*45" EAST ALONG THE EAST LINE THEREOF 144.50 FEET; THENCE SOUTH 89 47W WEST 21.41 FEET TO THE</p>
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17. MISCELLANEOUS:
 FIXTURE FILING

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11c. MAILING ADDRESS	CITY	STATE	POSTAL CODE

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):
 200809250098. RECORDS OF SKAGIT COUNTY, WASHINGTON.
 SITUATE IN THE COUNTY OF SKAGIT, STATE OF WASHINGTON

<p>13. <input checked="" type="checkbox"/> This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)</p> <p>15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):</p>	<p>14. This FINANCING STATEMENT:</p> <p><input type="checkbox"/> covers timber to be cut <input type="checkbox"/> covers as-extracted collateral <input checked="" type="checkbox"/> is filed as a fixture filing</p> <p>16. Description of real estate:</p> <p>WESTERLY MARGIN OF THE FRUITDALE COUNTY ROAD, SAID POINT BEING THE TRUE POINT OF BEGINNING; THENCE CONTINUE SOUTH 89 47'00 WEST 120 FEET; THENCE NORTH 1°W WEST PARALLEL WITH SAID WESTERLY MARGIN OF THE FRUITDALE COUNTY ROAD 76 FEET; THENCE NORTH 89 47'00" EAST 120 FEET MORE OR LESS, TO THE WESTERLY MARGIN OF SAID FRUITDALE COUNTY ROAD; THENCE SOUTH 1°34'30" EAST ALONG SAID WESTERLY</p>
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15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):	16. Description of real estate: MARGIN FOR 76 FEET, MORE OR LESS, TO THE TRUE POINT OF BEGINNING; EXCEPT THE EAST 10 FEET AS CONVEYED TO THE CITY OF SEDRO WOOLLEY, A MUNICIPAL CORPORATION IN SKAGIT COUNTY, STATE OF WASHINGTON, AS RECORDED UNDER SKAGIT COUNTY AUDITOR'S FILE NO. 200809250098. RECORDS OF SKAGIT COUNTY, WASHINGTON. SITUATE IN THE COUNTY OF SKAGIT, STATE OF

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

17. MISCELLANEOUS: