

UNIFORM COMMERCIAL CODE—FINANCING STATEMENT CHANGE—FORM N-UCC-2

STATE OF NEVADA

IMPORTANT— Read instructions on back before filling out form

87031989

This STATEMENT is presented for filing pursuant to the Nevada Uniform Commercial Code

|  |  |   |   |
|--|--|---|---|
| 1. FILE NO OF ORIG FINANCING STATEMENT<br>124059   | 1A. DATE OF FILING OF ORIG FINANCING STATEMENT<br>September 19, 1985 | 1B. DATE OF ORIG FINANCING STATEMENT<br>September 6, 1985                   | 1C. PLACE OF FILING ORIG FINANCING STATEMENT<br>Douglas County Recorder |
| 2. DEBTOR (AS APPEARS ON ORIGINAL FINANCING STATEMENT) (ONE NAME ONLY)<br><input checked="" type="checkbox"/> LEGAL BUSINESS NAME<br><input type="checkbox"/> INDIVIDUAL (LAST NAME FIRST)<br>LAKESIDE COVE PARTNERSHIP, a Nevada General Partnership  |  | 2A. SOCIAL SECURITY OR FEDERAL TAX NO<br>88-0201562                         |   |
| 2B. MAILING ADDRESS (AS APPEARS ON ORIGINAL FINANCING STATEMENT)<br>305 West Moana Lane  |  | 2C. CITY, STATE<br>Reno, Nevada   | 2D. ZIP CODE<br>89509   |
| 3. ADDITIONAL DEBTOR (IF ANY) (ONE NAME ONLY)<br><input type="checkbox"/> LEGAL BUSINESS NAME<br><input type="checkbox"/> INDIVIDUAL (LAST NAME FIRST)   |  | 3A. SOCIAL SECURITY OR FEDERAL TAX NO                                       |   |
| 3B. MAILING ADDRESS  |  | 3C. CITY, STATE   | 3D. ZIP CODE  |
| 4. ADDITIONAL DEBTOR (IF ANY) (ONE NAME ONLY)<br><input type="checkbox"/> LEGAL BUSINESS NAME<br><input type="checkbox"/> INDIVIDUAL (LAST NAME FIRST)   |  | 4A. SOCIAL SECURITY OR FEDERAL TAX NO                                       |   |
| 4B. MAILING ADDRESS  |  | 4C. CITY, STATE   | 4D. ZIP CODE  |
| 5. SECURED PARTY<br>NAME: VALLEY BANK OF NEVADA<br>MAILING ADDRESS: P.O. Box 10927<br>CITY: Reno STATE: NEVADA ZIP CODE: *(!)  |  | 5A. SOCIAL SECURITY NO, FED TAX NO OR BANK TRANSIT AND ABA NO<br>94-72/1224 |   |
| 6. ASSIGNEE OF SECURED PARTY (IF ANY)<br>NAME:<br>MAILING ADDRESS:<br>CITY: STATE: ZIP CODE:   |  | 6A. SOCIAL SECURITY NO, FED TAX NO OR BANK TRANSIT AND ABA NO               |   |
| 7. A <input type="checkbox"/> CONTINUATION—The original Financing Statement between the foregoing Debtor and Secured Party bearing the file number and date shown above is continued. If collateral is crops or timber, fixtures, or oil, gas or minerals check here <input type="checkbox"/> and insert description of real property on which growing or to be grown or to which affixed or to be affixed or from which to be extracted in Item 8 below. If crops or fixtures, also insert name of record owner of real estate. Effective only if submitted within 6 months prior to expiration date. |  |   |   |
| B <input type="checkbox"/> RELEASE—From the collateral described in the Financing Statement bearing the file number shown above, the Secured Party releases the collateral described in Item 8 below. Release does not terminate debt.   |  |   |   |
| C <input type="checkbox"/> ASSIGNMENT—The Secured Party certifies that the Secured Party has assigned to the Assignee above named, all or part of the Secured Party's rights under the Financing Statement bearing the file number shown above in the collateral described in Item 8 below.  |  |   |   |
| D <input checked="" type="checkbox"/> TERMINATION—The Secured Party certifies that the Secured Party no longer claims a security interest under the Financing Statement bearing the file number shown above.   |  |   |   |
| E <input type="checkbox"/> AMENDMENT—The Financing Statement bearing the file number shown above is amended as set forth in Item 8 below. (Signature of Debtor(s) and Secured Party(ies) required on all amendments)   |  |   |   |

8.

9. (Date) August 28 19 87

By: \_\_\_\_\_ (TITLE)

By: Bob Walter Vice President (TITLE)  
Bob Walter (SIGNATURE(S) OF SECURED PARTY(IES))  
VALLEY BANK OF NEVADA (TYPE NAME(S))

10. This Space for Use of Filing Officer (Date, Time, Filing Office)

REQUESTED BY  
Stewart Tille (Raw)  
IN OFFICIAL RECORDS OF  
SOUTHERN CO. NEVADA

'87 OCT -2 P4:04

183641

SUZANNE BEAUDREAU  
RECORDER

\$5.00 PAID [Signature] DEPUTY

11. Return Copy to

NAME: VALLEY BANK OF NEVADA

ADDRESS: Reno Plaza III/Loan Closing Group

CITY, STATE: P.O. Box 10927

AND ZIP: Reno, NV 89510

Attn: Linda MacLeod

THIS SPACE FOR USE OF FILING OFFICER

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