

**UNIFORM COMMERCIAL CODE - FINANCING STATEMENT - FORM UCC-1**  
**IMPORTANT - Read instructions on back before filling out form.**

REORDER FROM  
**Registre, Inc.**  
 514 PIERCE ST.  
 P.O. BOX 218  
 ANOKA, MN, 55303  
 (612) 421-1713

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

**TO BE RECORDED IN THE REAL ESTATE FILE IN DOUGLAS COUNTY**

1. DEBTOR (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input checked="" type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) <b>BUSCAY, GEORGE J.</b>		1A. SOCIAL SECURITY OR FEDERAL TAX NO. <span style="background-color: black; color: black;">XXXXXXXXXX</span> 0373	
1B. MAILING ADDRESS <b>3428 BASALT</b>		1C. CITY, STATE <b>CARSON CITY NV</b>	
1E. RESIDENCE ADDRESS		1D. ZIP CODE <b>89705</b>	
2. ADDITIONAL DEBTOR (IF ANY) (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input checked="" type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) <b>BUSCAY, KATHLEEN A.</b>		2A. SOCIAL SECURITY OR FEDERAL TAX NO. <span style="background-color: black; color: black;">XXXXXXXXXX</span> 6711	
2B. MAILING ADDRESS <b>3428 BASALT</b>		2C. CITY, STATE <b>CARSON CITY NV</b>	
2E. RESIDENCE ADDRESS		2D. ZIP CODE <b>89705</b>	
2F. CITY, STATE		2G. ZIP CODE	
3. <input type="checkbox"/> ADDITIONAL DEBTOR(S) ON ATTACHED SHEET			
4. SECURED PARTY NAME <b>SILVER HILLS OF CARSON</b> MAILING ADDRESS <b>4389 NORTH CARSON STREET</b> CITY <b>CARSON CITY</b> STATE <b>NV</b> ZIP CODE <b>89706</b>		4A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.R.A. NO.	
5. ASSIGNEE OF SECURED PARTY (IF ANY) <b>GREEN TREE ACCEPTANCE, INC.</b> NAME MAILING ADDRESS <b>1830 EAST SAHARA AVE. SUITE 220</b> CITY <b>LAS VEGAS</b> STATE <b>NV</b> ZIP CODE <b>89104</b>		5A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.R.A. NO.	
6. This FINANCING STATEMENT covers the following types or items of property (if crops or timber, include description of real property on which growing or to be growing and name of record owner of such real estate; if fixtures, include description of real property to which affixed or to be affixed and name of record owner of such real estate; if oil, gas or minerals, include description of real property from which to be extracted).			
1991 SKYLINE CORPORATION 26 X 60 LEXINGTON SERIAL# 2T70-0341D AND INCLUDING ALL FURNITURE, FIXTURES, APPURTENANCES THEREIN AND THERETO; INCLUDING BUT NOT LIMITED TO THOSE ITEMS SPECIFIED ON THE MANUFACTURERS INVOICE AND/OR PURCHASE AGREEMENT AND/OR INSTALLMENT CONTRACT OR INSTALLMENT LOAN AGREEMENT. "THIS FINANCING STATEMENT DOES NOT APPLY TO NONPURCHASE MONEY HOUSEHOLD GOODS AS DEFINED AT 16 CFR 444.(i) OR THE STATE LAW EQUIVALENT STATUTE."			
6A. _____ SIGNATURE OF RECORD OWNER		6C. \$ _____ MAXIMUM AMOUNT OF INDEBTEDNESS TO BE SECURED AT ANY ONE TIME (OPTIONAL)	
6B. _____ TYPE OF RECORD OWNER OF REAL PROPERTY			
7. Check <input checked="" type="checkbox"/> if Applicable	A <input type="checkbox"/> Proceeds of collateral are also covered	B <input type="checkbox"/> Products of collateral are also covered	C <input type="checkbox"/> Proceeds of above described original collateral in which a security interest was perfected (Debtors Signature Not Required)
	D <input type="checkbox"/> Collateral was brought into this State subject to security interest in another jurisdiction (Debtors Signature Not Required)		
8. Check <input checked="" type="checkbox"/> if Applicable	<input type="checkbox"/> DEBTOR IS A "TRANSMITTING UTILITY" IN ACCORDANCE WITH NRS 704.205 AND NRS 104.9403		

THIS SPACE FOR USE OF FILING OFFICER

9. (Date) 3/11 1992

By: George J. Buscay (SIGNATURE(S) OF DEBTOR(S))  
**GEORGE J. BUSCAY** (TYPE NAME(S))

By: Kathleen A. Buscay (SIGNATURE(S) OF SECURED PARTY(IES))  
**KATHLEEN A. BUSCAY** (TITLE)

By: Las Saunders (SIGNATURE(S) OF SECURED PARTY(IES))  
**SILVER HILLS OF CARSON** (TYPE NAME(S))

11. This Space for Use of Filing Officer  
 (Date, Time, File Number and Filing Officer)

**07411**

REQUESTED BY  
Green Tree Acceptance  
 IN OFFICIAL RECORDS OF  
 DOUGLAS CO., NEVADA

10.  Return Copy to  
**GREEN TREE ACCEPTANCE, INC.**

NAME  
 ADDRESS **1830 EAST SAHARA AVE. SUITE 220**  
 CITY, STATE **LAS VEGAS NV 89104**  
 AND ZIP

**70307018**

**'92 APR 16 10:32**

SUZANNE BRADREAU  
 RECORDER **276223**

\$ 11.00 PAID Ka DEPUTY  
**BOOK 492 PAGE 3042**