

5311

UNIFORM COMMERCIAL CODE — FINANCING STATEMENT CHANGE — FORM N-UCC-2  
IMPORTANT — Read instructions on back before filling out form

STATE OF NEVADA

STANDARD FORMS COMPANY — Phoenix - Nevada - Calif. — 300-F502

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

Receipt # \_\_\_\_\_

#11081

1. FILE NO. OF ORIG. FINANCING STATEMENT <b>Document No. 259847</b>	1A. DATE OF FILING OF ORIG. FINANCING STATEMENT <b>9/10/91</b>	1B. DATE OF ORIG. FINANCING STATEMENT <b>Not Dated</b>	1C. PLACE OF FILING ORIG. FINANCING STATEMENT <b>Douglas County, Nevada</b>
2. DEBTOR (AS APPEARS ON ORIGINAL FINANCING STATEMENT) (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input checked="" type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) <b>FERNANDEZ, MICHAEL J.</b>		2A. SOCIAL SECURITY OR FEDERAL TAX NO. <b>560-06-0050</b>	
2B. MAILING ADDRESS (AS APPEARS ON ORIGINAL FINANCING STATEMENT) <b>655 S. Fairroaks Ave., Apt. E316</b>		2C. CITY, STATE <b>Sunnyvale, CA</b>	2D. ZIP CODE <b>94086</b>
3. ADDITIONAL DEBTOR (IF ANY) (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input checked="" type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) <b>KNEIS, BRIAN C.</b>		3A. SOCIAL SECURITY OR FEDERAL TAX NO. <b>8678</b>	
3B. MAILING ADDRESS <b>655 S. Fairroaks Avenue, Apt. E316</b>		3C. CITY, STATE <b>Sunnyvale, CA</b>	3D. ZIP CODE <b>94086</b>
4. ADDITIONAL DEBTOR (IF ANY) (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <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 NAME <b>Virginia Beach Federal Savings and Loan Association</b> MAILING ADDRESS <b>P. O. Box 848</b> CITY <b>Virginia Beach</b> STATE <b>Virginia</b> ZIP CODE <b>23451</b>		5A. SOCIAL SECURITY NO., FED. TAX NO. OR BANK TRANSIT AND A.B.A. NO. <b>54-0417855</b>	
6. ASSIGNEE OF SECURED PARTY (IF ANY) NAME <b>N/A</b> MAILING ADDRESS CITY STATE ZIP CODE		6A. SOCIAL SECURITY NO., FED. TAX NO. OR BANK TRANSIT AND A.B.A. NO.	

7. 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  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  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  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  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  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) April 15 1992

By: \_\_\_\_\_ (SIGNATURE(S) OF DEBTOR(S)) (TITLE)

By: LOUVENIA PRIDE (TYPE NAME(S)) VICE PRESIDENT (TITLE)  
\_\_\_\_\_  
SIGNATURE(S) OF SECURED PARTY(IES)

Virginia Beach Federal Savings & Loan Association  
TYPE NAME(S)

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

11. **Return Copy to**

NAME Mr. Michael J. Fernandez  
ADDRESS Mr. Brian C. Kneis  
CITY, STATE AND ZIP 655 S. Fairroaks Ave., Apt. E316 Sunnyvale, CA 94086

REQUESTED BY  
**PACIFIC TITLE, INC.**  
IN OFFICIAL RECORDS OF  
DOUGLAS CO., NEVADA

93 JUN 19 AM 10:2

SUZANNE BEAUDREAU  
RECORDER **257579**

PAID K2 DEPUTY FILING FEE  
SEE INSTRUCTIONS

BOOK **193** PAGE **2353**

THIS SPACE FOR USE OF FILING OFFICER