

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

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

1. FILE NO OF ORIG FINANCING STATEMENT 280986	1A. DATE OF FILING OF ORIG FINANCING STATEMENT 06/15/92	1B. DATE OF ORIG FINANCING STATEMENT 06/09/92	1C. PLACE OF FILING ORIG FINANCING STATEMENT DOUGLAS COUNTY
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) MOOSBERG, MARTIN			2A. SOCIAL SECURITY OR FEDERAL TAX NO [REDACTED] 4885
2B. MAILING ADDRESS (AS APPEARS ON ORIGINAL FINANCING STATEMENT) 4125 RED CANYON AVE		2C. CITY, STATE WELLINGTON, NV	2D. ZIP CODE 89444
3. ADDITIONAL DEBTOR (IF ANY) (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input checked="" type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) MOOSBERG, MARGARET H			3A. SOCIAL SECURITY OR FEDERAL TAX NO [REDACTED] 2132
3B. MAILING ADDRESS 4125 RED CANYON AVE		3C. CITY, STATE WELLINGTON, NV	3D. ZIP CODE 89444
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 VALLEY BANK OF NEVADA MAILING ADDRESS P.O. BOX 98567 CITY LAS VEGAS STATE NV ZIP CODE 89193			5A. SOCIAL SECURITY NO., FED. TAX NO. OR BANK TRANSIT AND A.B.A. NO 9472/1224
6. ASSIGNEE OF SECURED PARTY (IF ANY) NAME MAILING ADDRESS CITY STATE ZIP CODE			6A. SOCIAL SECURITY NO., FED. TAX NO. OR BANK TRANSIT AND A.B.A. NO

7.

A **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. ALL OF DEBTOR'S FIXTURES WHETHER NOW OWNED OR HEREAFTER ACQUIRED, AND ALL ACCESSIONS, SUBSTITUTIONS, REPLACEMENTS AND PARTS, USED OR ACQUIRED FOR USE IN CONNECTION WITH THE DESCRIBED MOBILE HOME: TOGETHER WITH ALL CASH AND NON-CASH PROCEEDS THEREOF INCLUDING BUT NOT LIMITED TO PROCEEDS OF POLICIES OF INSURANCE, COLLATERAL MAY BE AFFIXED TO REAL PROPERTY LOCATED AT 4125 RED CANYON AVENUE, WELLINGTON NV 89444, LEGALLY DESCRIBED AS: LOT 16, OF TOPAZ RANCH ESTATES NO1 IN DOUGLAS COUNTY, NEVADA, FILED ON DECEMBER 4, 1963, IN BOOK 20, PAGE 717, DOCUMENT NO. 23962

9.

(Date) JUNE 2 1994

By: _____ (TITLE)
valley bank of nevada
TYPE NAME(S)

By: Jana C Scott (TITLE)
Jana C Scott Group Operations Manager
TYPE NAME(S)

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

REQUESTED BY
Beverly Ann
IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

11. Return Copy to

NAME BANK OF AMERICA
ADDRESS P.O. BOX 98543
CITY, STATE LAS VEGAS, NV 89193
AND ZIP IL/056-10-00001447

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SUZANNE BEAUREAU
RECORDER

\$16.00 PAID Li DEPUTY
FILING FEE
SEE INSTRUCTIONS

THIS SPACE FOR USE OF FILING OFFICER