

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

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

IMPORTANT:

Read instructions on back before filling out form.

Receipt No. _____

1. File No. of Orig. Financing Statement 173867	1A. Date of Filing of Orig. Financing Statement March 7, 1988	1B. Date of Orig. Financing Statement January 25, 1988	1C. Place of Filing Orig. Financing Statement Douglas County, NV
2. DEBTOR (ONE NAME ONLY) <input checked="" type="checkbox"/> LEGAL BUSINESS NAME <input type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) Swensen's Ice Cream		2A. SOCIAL SECURITY OR FEDERAL TAX NO. 8301	
2B. MAILING ADDRESS Harrah's Tahoe, Highway 50		2C. CITY, STATE Stateline, NV	2D. ZIP CODE 89449
3. ADDITIONAL DEBTOR (If Any) (ONE NAME ONLY) <input checked="" type="checkbox"/> LEGAL BUSINESS NAME <input type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) Price, Edwin D.		3A. SOCIAL SECURITY OR FEDERAL TAX NO. 8301	
3B. MAILING ADDRESS Harrah's Tahoe, Highway 50		3C. CITY, STATE Stateline NV	3D. ZIP CODE 89449
4. <input type="checkbox"/> ADDITIONAL DEBTOR(S) ON ATTACHED SHEET			
5. SECURED PARTY NAME Truckee River Bank MAILING ADDRESS P.O. Box 61000 CITY Truckee STATE CA ZIP CODE 96160		5A. SOCIAL SECURITY NO. FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO. 1211-3818-1	
6. ASSIGNEE OF SECURED PARTY (If Any) NAME _____ MAILING ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____		6A. SOCIAL SECURITY NO. FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. 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. Any changes made to Items 2 thru 6 above must be made in Item 8 below. (Signature of Debtor(s) and Secured Party(ies) required on all amendments.)			
8. _____			

9. (Date) February 6 1995

By _____ (SIGNATURE(S) OF DEBTOR(S)) (TITLE) _____

By Barbara Bolstad (SIGNATURE(S) OF SECURED PARTY(IES)) (TITLE) _____

Truckee River Bank/Barbara Bolstad - SBA SVG
TYPE NAME(S)

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

REQUESTED BY
Truckee River Bank
IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

15 FEB 15 AM 12

LINDA SLATER
RECORDER
16.00 PAID L& DEPUTY

11. Return Copy to:

NAME ADDRESS CITY, STATE AND ZIP Truckee River Bank P.O. Box 61000 Truckee ca 96160	Trust Account Number (If Applicable) _____
ATTN: Barbara Bolstad SBA Servicing	

THIS SPACE FOR USE OF FILING OFFICER

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