

STATE OF NEVADA
UNIFORM COMMERCIAL CODE—FINANCING STATEMENT CHANGE—FORM UCC-2
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 294272	1A. DATE OF FILING OF ORIG. FINANCING STATEMENT 11/30/92	1B. DATE OF ORIG. FINANCING STATEMENT	1C. PLACE OF FILING ORIG. FINANCING STATEMENT
2. DEBTOR (LAST NAME FIRST) BRYAN, VIRGINIA			2A. SOCIAL SECURITY OR FEDERAL TAX NO.
2B. MAILING ADDRESS PO BOX 2164		2C. CITY, STATE STATELINE NV	2D. ZIP CODE 89449
3. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST)			3A. SOCIAL SECURITY OR FEDERAL TAX NO.
3B. MAILING ADDRESS		3C. CITY STATE	3D. ZIP CODE
4. SECURED PARTY NAME NORWEST FINANCIAL NEVADA, INC. MAILING ADDRESS 1982 HWY 50 EAST CITY CARSON CITY STATE NV ZIP CODE 89701			4A. SOCIAL SECURITY NO., FED. TAX NO. OR BANK TRANSIT AND A.B.A. NO.
5. ASSIGNEE OF SECURED PARTY (IF ANY) NAME MAILING ADDRESS CITY STATE ZIP CODE			5A. SOCIAL SECURITY NO., FED. TAX NO. OR BANK TRANSIT AND A.B.A. NO.
6. <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, check here <input type="checkbox"/> and insert description of real property on which growing or to be grown in Item 7 below.			
<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 7 below.			
<input type="checkbox"/> ASSIGNMENT—The Secured Party certifies that the Secured Party has assigned to the Assignee above named, all the Secured Party's rights under the Financing Statement bearing the file number shown above in the collateral described in Item 7 below.			
<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.			
<input type="checkbox"/> AMENDMENT—The Financing Statement bearing the file number shown above is amended as set forth in Item 7 below. (Signature of Debtor required on all amendments.)			
<input type="checkbox"/> OTHER			

THIS SPACE FOR USE OF FILING OFFICER

7.

8. (Date) MAY 2 19 95

By: _____
SIGNATURE(S) OF DEBTOR(S) (TITLE)
NORWEST FINANCIAL

By: TRACY KRUK - CSR _____
SIGNATURE(S) OF SECURED PARTY (IES) (TITLE)

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

REQUESTED BY
Norwest Financial
IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

'95 MAY -8 01:34

LINDA SLATER
RECORDER

\$15.00 PAID DEPUTY

10. Return Copy to

NAME NORWEST FINANCIAL
ADDRESS 3861 S. CARSON ST
CITY, STATE AND ZIP CARSON CITY NV 89701

BK0595PG1064 361656