

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 184443	1A. Date of Filing of Orig. Financing Statement AUG 17, 88	1B. Date of Orig. Financing Statement	1C. Place of Filing Orig. Financing Statement DOUGLAS County
2. DEBTOR (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input checked="" type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) Teddy J. Chichester		2A. SOCIAL SECURITY OR FEDERAL TAX NO. 5823	
2B. MAILING ADDRESS P.O. Box 644		2C. CITY, STATE Minden NV	2D. ZIP CODE 89423
3. ADDITIONAL DEBTOR (if Any) (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input checked="" type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) ROSS J. Chichester		3A. SOCIAL SECURITY OR FEDERAL TAX NO. 10378	
3B. MAILING ADDRESS P.O. Box 644		3C. CITY, STATE Minden, NV	3D. ZIP CODE 89423
4. <input type="checkbox"/> ADDITIONAL DEBTOR(S) ON ATTACHED SHEET			
5. SECURED PARTY NAME Constance J. Wennhold MAILING ADDRESS P.O. Box 1554 CITY Minden STATE NV ZIP CODE 89423		5A. SOCIAL SECURITY NO. FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO. 535-44-9063	
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. By Teddy J. Chichester (Date) 8-21 1995
 SIGNATURE(S) OF DEBTOR(S) (TITLE) owner
Teddy J. Chichester
 TYPE NAME(S)
 By C. J. Wennhold (Signature)
 SIGNATURE(S) OF SECURED PARTY(IES) (TITLE) owner
C. J. Wennhold
 TYPE NAME(S)

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

REQUESTED BY
Teddy Chichester
 IN OFFICIAL RECORDS OF
 DOUGLAS CO., NEVADA
95 AUG 21 P4:18
 LINDA SLATER
 RECORDER
8.16 PAID BL DEPUTY
 YELLOW—Alphabetical; PINK—Acknowledgement;
 GREEN—Secured Party; BLUE—Debtor.

11. Return Copy to:
 NAME Teddy Chichester
 ADDRESS P.O. Box 644
 CITY, STATE AND ZIP Minden, NV 89423
 Trust Account Number (if Applicable)

THIS SPACE FOR USE OF FILING OFFICER

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