

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 251666	1A. Date of Filing of Orig. Financing Statement May 30, 1991	1B. Date of Orig. Financing Statement May 13, 1991	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) Kingsbury Industries, Inc.		2A. SOCIAL SECURITY OR FEDERAL TAX NO. 88-0153644	
2B. MAILING ADDRESS P.O. Box 1632		2C. CITY, STATE Zephyr Cove, NV	2D. ZIP CODE 89448
3. ADDITIONAL DEBTOR (If Any) (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input type="checkbox"/> INDIVIDUAL (LAST NAME FIRST)		3A. SOCIAL SECURITY OR FEDERAL TAX NO.	
3B. MAILING ADDRESS		3C. CITY, STATE	3D. ZIP CODE
4. <input type="checkbox"/> ADDITIONAL DEBTOR(S) ON ATTACHED SHEET			
5. SECURED PARTY NAME First Interstate Bank of Nevada, N.A. Dept. 754 MAILING ADDRESS P.O. Box 98588 CITY Las Vegas STATE NV ZIP CODE 89193-8588		5A. SOCIAL SECURITY NO. FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO. 1212-00019	
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 checked="" 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 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) November 27 1995

By _____ (TITLE)

SIGNATURE(S) OF DEBTOR(S)

By Alberta Neal (TITLE) Supervisor

SIGNATURE(S) OF SECURED PARTY(IES)

First Interstate Bank of Nevada, N.A. (TYPE NAME(S))

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

REQUESTED BY
FIB

IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

'95 DEC -1 AM 109

WINDA SLATER
RECORDER

PAID DEPUTY

YELLOW—Alphabetical; PINK—Acknowledgement;
GREEN—Secured Party; BLUE—Debtor.

11. **Return Copy to: 12-4879194643 CBC#20057**

FIRST INTERSTATE BANK
ADDRESS **P.O. BOX 3330**
CITY, STATE AND ZIP **M/S: BV-120**
PORTLAND, OR 97208

Trust Account Number (If Applicable)

THIS SPACE FOR USE OF FILING OFFICER

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