

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

1. DEBTOR (LAST NAME FIRST) BOUTTE', EVANGELINE S.		1A. SOCIAL SECURITY OR FEDERAL TAX NO. 3676	
1B. MAILING ADDRESS PO BOX 10925		1C. CITY, STATE ZEPHYR COVE, NV	1D. ZIP CODE 89448
1E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 1B)		1F. CITY, STATE	1G. ZIP CODE

2. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST)		2A. SOCIAL SECURITY OR FEDERAL TAX NO.	
2B. MAILING ADDRESS		2C. CITY, STATE	2D. ZIP CODE
2E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 2B)		2F. CITY, STATE	2G. ZIP CODE

3. DEBTOR(S) TRADE NAMES OR STYLES (IF ANY)		3A. FEDERAL TAX NO.	
4. ADDRESS OF DEBTOR(S) CHIEF PLACE OF BUSINESS (IF ANY)		2A. CITY, STATE	2B. ZIP CODE

5. SECURED PARTY NAME NEVADA BANKING COMPANY		5A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO. 88-0170659	
MAILING ADDRESS 229 KINGSBURY GRADE P.O. BOX 5700			
CITY STATELINE	STATE NV	ZIP CODE 89449	

6. ASSIGNEE OF SECURED PARTY (IF ANY) NAME		6A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO.	
MAILING ADDRESS			
CITY	STATE	ZIP CODE	

7. This FINANCING STATEMENT covers the following types or items of property (if crops or timber, include description of real property on which growing or to be grown and name of record owner of such real estate, if fixtures, include description of real property to which affixed or to be affixed and name of record owner of such real estate; if oil, gas or minerals, include description of real property from which to be extracted.)

1974 60' X 12' CHAMPION MOBILE HOME and SERIAL NO. 094966S6999; all Fixtures; together with the following specifically described property: 1974 60' X 12' CHAMPION MOBILE HOME, SERIAL NO. 094966S6999; whether any of the foregoing is owned now or acquired later; all accessions, additions, replacements, and substitutions relating to any of the foregoing; all records of any kind relating to any of the foregoing; all proceeds relating to any of the foregoing (including insurance, general intangibles and accounts proceeds).

This Financing Statement is to be recorded in the real estate records. Some or all of the collateral is located on the following described real estate: N/A - NOT TAKING SECURITY INTEREST IN REAL PROPERTY TAHOE SHORES MOBILE HOME COMMUNITY is the record owner of the real property described on which the collateral is located.

7A. _____ SIGNATURE OF RECORD OWNER	7C. \$ _____ MAXIMUM AMOUNT OF INDEBTEDNESS TO BE SECURED AT ANY ONE TIME (OPTIONAL)
7B. _____ (TYPE) RECORD OWNER OR REAL PROPERTY	

8. Check <input checked="" type="checkbox"/> If Applicable	A <input checked="" type="checkbox"/> Proceeds of collateral are also covered	B <input checked="" type="checkbox"/> Products of collateral are also covered	C <input type="checkbox"/> Proceeds of above described original collateral in which a security interest was perfected	D <input type="checkbox"/> Collateral was brought into this State subject to security interest in another jurisdiction
--	---	---	---	--

9. Check <input checked="" type="checkbox"/> If Applicable	<input type="checkbox"/> DEBTOR IS A "TRANSMITTING UTILITY" IN ACCORDANCE WITH NRS 704.205 AND NRS 104.9403
--	---

10. (Date) January 31 19 96

BOUTTE', EVANGELINE S.

By: *Evangelina S. Boutte*
SIGNATURE(S) OF DEBTOR(S) (TITLE)

NEVADA BANKING COMPANY

By: *Wayne Snyder* **Wayne Snyder, E.V.P.**
SIGNATURE(S) OF SECURED PARTY(IES) (TITLE)

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

08059

REQUESTED BY Nevada Banking Co
IN OFFICIAL RECORDS OF DOUGLAS CO., NEVADA

'96 FEB -6 A10:35

LINDA SLATER
RECORDER

\$ 15.00 PAID ko DEPUTY

FILING FEES SEE INSTRUCTIONS

11. Return Copy to

NAME **NEVADA BANKING COMPANY**
ADDRESS **229 KINGSBURY GRADE P.O. BOX 5700**
CITY, STATE AND ZIP **STATELINE, NV 89449**