

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 BK895 PG3118 07980	1A. Date of Filing of Orig. Financing Statement 08/18/95	1B. Date of Orig. Financing Statement 06/01/95	1C. Place of Filing Orig. Financing Statement Douglas County, Nevada
2. DEBTOR (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) Holmes, Sharon			2A. SOCIAL SECURITY OR FEDERAL TAX NO. 2555
2B. MAILING ADDRESS 150 S. Decatur		2C. CITY, STATE Las Vegas, NV	2D. ZIP CODE 89107
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. ADDITIONAL DEBTOR(S) ON ATTACHED SHEET

5. SECURED PARTY NAME Community Bank of Nevada MAILING ADDRESS P. O. Box 35318 CITY Las Vegas STATE NV ZIP CODE 89133-5318	5A. SOCIAL SECURITY NO. FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO. 880317251
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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.
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7. A. 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 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. 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. 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. 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. 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 20, 1998**

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

Community Bank of Nevada
~~XXXXXXXXXX~~

By *Letha Kennedy* (TITLE) **Loan Operations Officer**
SIGNATURE(S) SECURED PARTY(IES)

TYPE NAME(S) _____

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

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

'98 DEC -3 10:35

LINDA SLATER
RECORDER

\$15 PAID 10 DEPUTY

CANARY—Alphabetical; PINK—Acknowledgement;
GREEN—Secured Party; CANARY—Debtor.

11. **Return Copy to:**

NAME Community Bank of Nevada	Trust Account Number (If Applicable)
ADDRESS P. O. Box 35318	
CITY, STATE AND ZIP Las Vegas, NV 89133-5318	

THIS SPACE FOR USE OF FILING OFFICER

BK 1298PG0814

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