## UNIFORM COMMERCIAL CODE - FINANCING STATEMENT CHANGE - FORM N-UCC-2

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IMPORTANT: Read instructions on back before filling out form.	•	pt No
1. File No. of Orig. Financing Statement  **D8234*** 0407110 2/24/97	1B. Date of Orig. Financing Statement 2/19/97	1C. Place of Filing Orig. Financing Statement  Douglas County
2. DEBTOR (ONE NAME ONLY)  ILLEGAL BUSINESS NAME  ZNIDIVIDUAL (LAST NAME FIRST)  PANCHOT, RONALD W		2A. SOCIAL SECURITY OR FEDERAL TAX NO. —9212
2B. MAILING ADDRESS	2C. CITY, STATE	2D. ZIP CODE
1304 Saratoga St.	Minden, N	NV 89423
3. ADDITIONAL DEBTOR (If Any) (ONE NAME ONLY)		3A. SOCIAL SECURITY OR FEDERAL TAX NO.
DINDIVIDUAL (LAST NAME FIRST)  CREATIVE MASONRY  BB. MAILING ADDRESS	3C. CITY, STATE	3D. ZIP CODE
I. ADDITIONAL DEBTOR(S) ON ATTACHED SHEET		
5. SECURED PARTY  NAME  Nevada Banking Company  MAILING ADDRESS 1374 USHWY 395 North		5A. SOCIAL SECURITY NO. FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO. 88-0170659
CITY Gardnerville STATE NV	ZIP CODE 89410	
6. ASSIGNEE OF SECURED PARTY (If Any)		6A. SOCIAL SECURITY NO. FEDERAL TAX NO.
NAME		OR BANK TRANSIT AND A.B.A. NO.
MAILING ADDRESS CITY STATE	ZIP CODE	
7. CONTINUATION—The original Financing Statement between the foreg	<u> </u>	
is crops or timber, fixtures, or oil, gas or minerals check here and or from which to be extracted in Item 8 below. If crops or fixtures, a expiration date.	insert description of real property on which also insert name of record owner of real est	growing or to be grown or to which affixed or to be affixed late. Effective only if submitted within 6 months prior to
B. RELEASE—From the collateral described in the Financing Statement below. Release does not terminate debt.		
C. ASSIGNMENT—The Secured Party certifies that the Secured Party has Statement bearing the file number shown above in the collateral des		
D. X TERMINATION—The Secured Party certifies that the Secured Party no		
E AMENDMENT—The Financing Statement bearing the file number show made in Item 8 below. (Signature of Debtor(s) and Secured Party(i	vn above is amended as set forth in Item 8 l ies) required on all amendments.)	below. Any changes made to Items 2 thru 6 above must be
(Date) March 8	19.99	<ol> <li>This Space for Use of Filing Officer: (Date, Time, Fil Number and Filing Officer)</li> </ol>
BySIGNATURE(S) OF DEBTOR(S)	(TITLE)	REQUESTED BY
By SIGNATURE(S) OF SECURED PARTY(IES)  Vice	Presient /	Venach Dary IN
Brent Holderman TYPL NAME(S)		'99 MAR 11 All :50
1. Return Copy to:	<del></del>	<u> </u>
NAME Nevada Banking Company OTHY, STATE 1374 US HWY 395 North Gardnerville, NV 89410	Trust Account Number (If Applicable)	LINDA SLATER RECORDER PAIDE DEPUTY
	1	YELLOW—Alphabetical; PINK—Acknowledgement; GREEN—Secured Party: BLUE—Debtor.