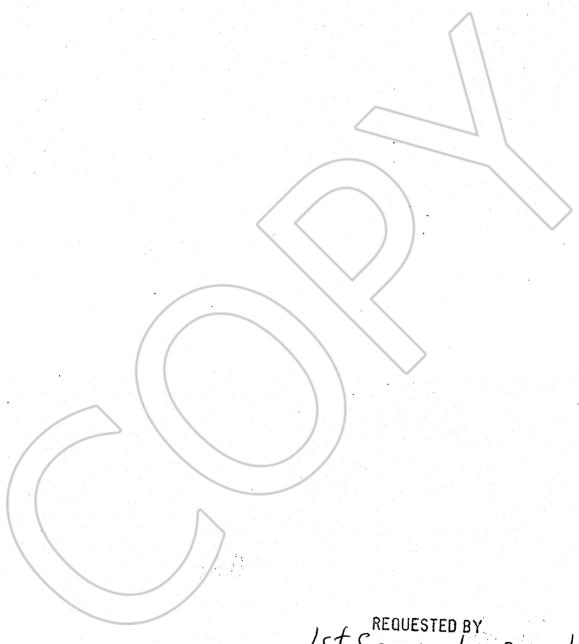
UNIFORM COMMERCIAL CODE-FORM N-UCC-2 (Rev. 12-93)

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

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

PORTANT: Read instructions on back before filling out form.	Receip	ot No
File No. of Orig. Financing Statement 1A. Date of Filing of Orig. Financing Statement 2/5/97	18. Date of Orig. Financing Statement 1/28/97	1C. Place of Filing Orig. Financing Statement DOUGLAS COUNTY
DEBTOR (ONE NAME ONLY) LEGAL BUSINESS NAME NOTICE DAVID B SWALANDER DAVID B SWALANDER		za. social security or federal tax no.
MAILING ADDRESS MAILIN	VE ZC. CITY, STATE MINDEN, NV.	89423 CODE
ADDITIONAL DEBTOR (If Any) (ONE NAME ONLY) LEGAL BUSINESS NAME X INDIVIDUAL (LAST NAME FIRST) LARISSA J SWALANDER		34 SOCIAL SECURITY OR FEDERAL TAX NO. 5013
MAILING ADDRESS 1555 KXMXXX LINSAY LANE	3C. CITY, STATE MINDEN, NV.	3 D. ZIP CODE 89423
ADDITIONAL DEBTOR(S) ON ATTACHED SHEET	TITADENTATI	
ECURED PARTY		5A. SOCIAL SECURITY NO. FEDERAL TAX NO OR BANK TRANSIT AND A.B.A. NO.
NAME MAILING ADDRESS		ON DAING THAIGST AND A.B.A. NO.
CITY STATE	ZIP CODE	
SSIGNEE 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 CONTINUATION—The original Financing Statement between the fore	ZIP CODE	
A. is crops or timber, fixtures, or oil, gas or minerals check here □ an or from which to be extracted in Item 8 below. If crops or fixtures, expiration date. B. RELEASE—From the collateral described in the Financing Stateme	, also insert name of record owner of real est	late. Effective only if submitted within 6 months prior t
below. Release does not terminate debt.		
C. ASSIGNMENT—The Secured Party certifies that the Secured Party be Statement bearing the file number shown above in the collateral d	has assigned to the Assignee above named, a lescribed in Item 8 below.	II or part of the Secured Party's rights under the Financin
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 sh made in Item 8 below. (Signature of Debtor(s) and Secured Party	own above is amended as set forth in Item 8 l y(ies) required on all amendments.)	below. Any changes made to Items 2 thru 6 above must b
	10	This Space for Use of Filing Officer: (Date, Time, Number and Filing Officer)
(Date) 5/10/00	19	Number and raing Orncer)
Ву		
SIGNATURE(S) OF DEBTOR(S)	(TITLE)	
THE NAMES		0
SIGNATURE(S) OF SECURED PARTY(IES)	(TITLE)	68
KEVIN D ELDER VP COMMERCIAL LENDING		depression
Return Copy to:		6 10
Return Copy to: FIRST SECURITY BANK OF NEVADA #	Б Ц	10
RESS OOT N. OTELIART STREET	Account	
Y, STATE YUL N SIEWARI SIREEI	Number (If Applicable)	
CARSON CITY,NV. 89701		YELLOW—Alphabetical; PINK—Acknowledgement;
		GREEN—Secured Party; BLUE—Debtor.



IN OFFICIAL RECORDS OF DOUGLAS CO., NEVADA

2000 MAY 12 PM 2: 12

LINDA SLATER
RECORDER

PAID 1 DEPUTY

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