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

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

Filed with: Douglas

Receipt No. \_\_\_\_\_

1. File No. of Orig. Financing Statement 07809 Bk0994 Pg2879	1A. Date of Filing of Orig. Financing Statement 9/19/94	1B. Date of Orig. Financing Statement 9/13/94	1C. Place of Filing Orig. Financing Statement Douglas
2. DEBTOR (As Appears on Original Financing Statement) (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input checked="" type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) Fowler, John S.			2A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED]-0329
2B. MAILING ADDRESS 3950 Mica Court		2C. CITY, STATE Wellington, NV	2D. ZIP CODE 89444
3. ADDITIONAL DEBTOR (If Any) (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input checked="" type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) Fowler, Carol J.			3A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED] 1524
3B. MAILING ADDRESS 3950 Mica Court		3C. CITY, STATE Wellington, NV	3D. ZIP CODE 89444
4. ADDITIONAL DEBTOR (If Any) (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input type="checkbox"/> INDIVIDUAL (LAST NAME FIRST)			4A. SOCIAL SECURITY OR FEDERAL TAX NO.
4B. MAILING ADDRESS		4C. CITY, STATE	4D. ZIP CODE
5. SECURED PARTY NAME Bank of America FSB MAILING ADDRESS P.O. Box 98567 CITY Las Vegas STATE NV ZIP CODE 89193			5A. SOCIAL SECURITY NO. FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO. 9472
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 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 checked="" 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. (Signature of Debtor(s) and Secured Party(ies) required on all amendments.)			
8. THIS FIXTURE FILING IS TO BE RECORDED IN THE REAL ESTATE RECORDS. Termination: The secured party no longer claims a security interest under the financing statement bearing the file number shown above. <i>Acct 6200221978</i> <i>3498587-22</i>			

No. of Additional Sheets Presented: 0

9. (Date) Dec 5 2000

By \_\_\_\_\_ (SIGNATURE(S) OF DEBTOR(S)) (TITLE)

Bank of America FSB  
By Robert Lepin (SIGNATURE(S) OF SECURED PARTY(IES)) (TITLE)  
Robert Lepin, Authorized Agent

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

REQUESTED BY  
CT Corporation  
IN OFFICIAL RECORDS OF  
DOUGLAS CO., NEVADA

2001 JAN -8 PM 2:54

LINDA SLATER  
RECORDER

*\$16.00* PAID *Kg* DEPUTY

11. PLEASE RETURN TO:

CT Corporation System  
Attn: Tony Young  
1350 Treat Blvd. Suite 100  
Walnut Creek, CA 94596-2133  
(800) 874-8820

Trust Account Number (If Applicable)

346344

THIS SPACE FOR USE OF FILING OFFICER

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