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Bank of the West	_
IN OFFICIAL RECORDS OF DOUGLAS CO., NEVADA	

2004 SEP -7 AM 10: 47

UCC FINANCING STATEMENT AMENDME	IN I	/\	
FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional]		WERNE	R CHRISTEN
·		On	CORDER
B. SEND ACKNOWLEDGMENT TO: (Name and Address)		\$21 PAID	KO DEPUT
F	⊣	₽	WEFUI
√ URSULA PREBEZAC	'	\	\
PO BOX 1713	_		\
ZEPHYR COVE, NV 89448			\
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<u> </u>	THE ABOVE	SPACE IS FOR FILING OFFICE	LUSE ONLY
1a. INITIAL FINANCING STATEMENT FILE#	III ABOUT	1b. This FINANCING STATE	
0513996 BK 0501 PG 3262 (08692) FILED ON: 05-1	1-2001 2:27PM	to be filed [for record] (o	
2. TERMINATION: Effectiveness of the Financing Statement identified abov	re is terminated with respect to security interest(s) of		
3. CONTINUATION: Effectiveness of the Financing Statement identified a	above with respect to security interest(s) of the Sec	ured Party authorizing this Continuat	ion Statement is
continued for the additional period provided by applicable law.	< <		
4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b an	nd address of assignee in item 7c; and also give nam	e of assignor in item 9.	
i. AMENDMENT (PARTY INFORMATION): This Amendment affects	The state of the s	ly <u>one</u> of these two boxes.	
Also check one of the following three boxes and provide appropriate information i		400 Complete Street	77h1-l 11 7
CHANGE name and/or address: Please refer to the detailed instructions in regards to changing the name/address of a party.	DELETE name: Give record name to be deleted in item 6a or 6b.	ADD name: Complete item 7 also complete items 7e-7g (if	ra or 76, and also item 76; rapplicable).
G. CURRENT RECORD INFORMATION: [6a. ORGANIZATION'S NAME]		F.	
DA. URGANIZATION S NAME			
OR 66. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
PREBEZAC	URSULA		
7. CHANGED (NEW) OR ADDED INFORMATION:	1 Street Hill		l l
7a. ORGANIZATION'S NAME		$\overline{}$	
20	/ /	\/	
76. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDOLE NAME	SUFFIX
PREBEZAC	CHRISTOPHER		
c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
7d. SEE INSTRUCTIONS ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID#,	if any
DEBTOR	/ /		NON
8. AMENDMENT (COLLATERAL CHANGE): check only one box.		•	
Describe collateral deleted or added, or give entire restated colla	terál description, or describa collateralassign	ed.	
97 CROWLINE CUDDY JTC27233A797			
MERCRUISER 7.4L I/O OK207734			
1			
97 VM BT 1VMBG2221V1006816			
\ / /			

- 1							
	NAME OF SECURED PARTY OF REC	40"	` .		*	•	•
	dds collateral or adds the authorizing Debtor,	or if this is a Termination authorize	ed by a Debtor, check here and	enter nai	me of DEB1	OR authorizing this Amendr	леnt.
OR	9a. ORGANIZATION'S NAME						
	BANK OF THE WEST	PO BOX 8160	WALNUT CREEK	$\mathbf{C}\mathbf{A}$	94596		
	9b. INDIVIDUAL'S LAST NAME		FIRST NAME			MIDDLE NAME	SUFFIX
	HUBBARD		DIANA				
10.0	OPTIONAL FILER REFERENCE DATA						
33	3-461135						

FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDMENT (FORM UCC3) (REV. 05/22/02)