			0/60/6 IN OFFICE	a Becords
			DOUGLA	AL RECORDS S CO., NEVAD
	UCC FINANCING STATEMENT AMEND	AENT	2004 SEP	15 AM 10:
	FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional]	WILLY I	WERNE	ER CHRISTEN CORDER
	Cheryl Medland 702-304-3721		116	A .
	B. SEND ACKNOWLEDGMENT TO: (Name and Address) Colonial Bank, N.A. 4670 S. Fort Apache Suite 250 Las Vegas, NV. 89147		\$PAID	KZ DEP
	Attn: Cheryl Medland			7 /
				/
	1a. INITIAL FINANCING STATEMENT FILE #		THE ABOVE SPACE IS FOR FILING OF	FICE USE ONLY
_	Bk 1003 Pg 8933 Doc 0593934		to be filed [for reco	rd] (or recorded) in th CORDS.
_	TERMINATION: Effectiveness of the Financing Statement identified CONTINUATION: Effectiveness of the Financing Statement identity			7.
	continued for the additional period provided by applicable law.			
	4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or			
	 AMENDMENT (PARTY INFORMATION): This Amendment affects Also check one of the following three boxes and provide appropriate inform 		of record. Check only one of these two boxes.	
	CHANGE name and/or address: Give current record name in item 6a claim name (if name change) in item 7a or 7b and/or new address (if address	r 6b: also give new	Ename: Give record name ADD name: Completed in item 6a or 6b.	plete item 7a or 7b, an plete items 7d-7g (if a
	CURRENT RECORD INFORMATION:	change) in item 76 to be de	select in nem ba of ob.	piete rienis 7u-7g (ii aj
	6a. ORGANIZATION'S NAME			
	H & S Construction, Inc			
		The state of the s	\ (
	OR 6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFF
	OR 65. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFF
	7. CHANGED (NEW) OR ADDED INFORMATION:	FIRST NAME	MIDDLE NAME	SUFF
		FIRST NAME	MIDDLE NAME	SUFF
	7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME			
	7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME	FIRST NAME	MIDDLE NAME	
	7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME OR 7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFI
	7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME			SUFI
	7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME OR 7b. INDIVIDUAL'S LAST NAME 7c. MAILING ADDRESS	FIRST NAME	MIDDLE NAME STATE POSTAL COL	SUFI DE COU
	7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME 7c. MAILING ADDRESS 7d. TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATION	FIRST NAME	MIDDLE NAME STATE POSTAL COL	SUFF DE COU
	7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME 7c. MAILING ADDRESS 7d. TAX ID #: SSN OR EIN ADD'L INFO RE 7e, TYPE OF ORGANIZATION DEBTOR 8. AMENDMENT (COLLATERAL CHANGE): check only one box.	FIRST NAME CITY TON 71, JURISDICTION OF O	MIDDLE NAME STATE POSTAL COL RGANIZATION 7g. ORGANIZATIONAL	
7	7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME OR 7b. INDIVIDUAL'S LAST NAME 7c. MAILING ADDRESS 7d. TAX ID #: SSN OR EIN ADD'L INFO RE 7e, TYPE OF ORGANIZATION DEBTOR	FIRST NAME CITY TON 7f, JURISDICTION OF O I collateral description, or describe	MIDDLE NAME STATE POSTAL COL IRGANIZATION 7g. ORGANIZATIONAL cottateral assigned.	SUFF COU ID #, if any
7	7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME 7c. MAILING ADDRESS 7d. TAX ID #: SSN OR EIN ADD'L INFO RE ORGANIZATION DEBTOR 8. AMENDMENT (COLLATERAL CHANGE): check only one box. Describe collateral deleted or added, or give entire restated restated or adds collateral or adds the authorizing Debtor, or if this is a Termination at	FIRST NAME CITY TON 7f, JURISDICTION OF O I collateral description, or describe HIS AMENDMENT (name of assignment)	MIDDLE NAME STATE POSTAL COL IRGANIZATION 7g. ORGANIZATIONAL cottateral assigned.	SUFI COU ID #, if any
7	7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME 7c. MAILING ADDRESS 7d. TAX ID #: SSN OR EIN ADD'L INFO RE ORGANIZATION DEBTOR 8. AMENDMENT (COLLATERAL CHANGE): check only one box. Describe collateral deleted or added, or give entire restated or adds collateral or adds the authorizing Debtor, or if this is a Termination at 9a. ORGANIZATION'S NAME	FIRST NAME CITY TON 7f, JURISDICTION OF O I collateral description, or describe HIS AMENDMENT (name of assignment)	MIDDLE NAME STATE POSTAL COL IRGANIZATION 7g. ORGANIZATIONAL cottateral assigned.	SUFI COU ID #, if any
7	7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME 7c. MAILING ADDRESS 7d. TAX ID #: SSN OR EIN ADD'L INFO RE ORGANIZATION DEBTOR 8. AMENDMENT (COLLATERAL CHANGE): check only one box. Describe collateral deleted or added, or give entire restated restated or adds collateral or adds the authorizing Debtor, or if this is a Termination at	FIRST NAME CITY TON 7f, JURISDICTION OF O I collateral description, or describe HIS AMENDMENT (name of assignment)	MIDDLE NAME STATE POSTAL COL IRGANIZATION 7g. ORGANIZATIONAL cottateral assigned.	SUFF COU ID #, if any

FILING OFFICE COPY — NATIONAL UCC FINANCING STATEMENT AMENDMENT (FORM UCC3) (REV. 07/29/98)

2. NAME OF PARTY AUTHORIZING THIS AMENDMENT (same as item 8 on Amendment form) 2. GREANDAINCHOINE MAINE Colonial Bank, N.A. 12b. Individual's Last NAME FIRST NAME MIDDLE NAME.SUFFIX 3. Use this space for additional information THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY See EXhibit "A" attached hereto and made a part thereof.	OLLOW INSTRUCTIONS (11. INITIAL FINANCING ST Bk 1003 Pg 8933 Do	ATEMENT FILE # (ent form)	\ \		
Colonial Bank, N.A. 12b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME, SUFFIX 3. Use this space for additional information THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY	12. NAME OF PARTY AUT	HORIZING THIS A	MENDMENT (same as item	9 on Amendment form)	\ \		
R 12b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME, SUFFIX 3. Use this space for additional information THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY		AME			\ \		
3. Use this space for additional information THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY		NAME IF	UDOT MAME	MIDDLE MAME OFFERM	\ \		
THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY	12B. INDIVIDUAL S LAST I	NAME	IKS! NAME	MIDDLE NAME, SUFFIX	\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		
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EXHIBIT "A" LEGAL DESCRIPTION

Order No.: 030702641

The land referred to herein is situated in the State of Nevada, County of Douglas, described as follows:

PARCEL 1:

Lots 240 through 243, inclusive, in Block C; Lots 250 through 252, inclusive, in Block D and Lots 259 through 266, inclusive, in Block B, as shown on the Final Map #PD99-02-07 of SARATOGA SPRINGS ESTATES UNIT 7, A PLANNED DEVELOPMENT, filed August 19, 2003 in Book 0803, Page 10079, Document No. 587125, Official Records of Douglas County, Nevada.

APN's 1420-28-215-007, 1420-28-114-008, 1420-28-114-007, 1420-28-114-006, 1420-28-215-016, 1420-28-215-015, 1420-28-215-014, 1420-28-215-024, 1420-28-215-023, 1420-28-215-022, 1420-28-215-021, 1420-28-215-020, 1420-28-215-019, 1420-28-215-018, 1420-28-215-017

PARCEL 2:

Lot 239, in Block C, and Lot 258, in Block B, as shown on the Final Map #PD99-02-07 of SARATOGA SPRINGS ESTATES UNIT 7, A PLANNED DEVELOPMENT, filed August 19, 2003 in Book 0803, Page 10079, Document No. 587125, Official Records of Douglas County, Nevada.

APN's 1420-28-215-008 AND 1420-28-215-025

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