1. Type form. 2. If space is inadequate continue on additional sheet. 3. Enclose filing fee 4. Filings in the Secretary of State's Office must contain either the debtor's federal employer identification or social security number. When the debtor is a sole proprietor, only the debtor's social security number is authorized to be filed. Prepaid account number Debtor (if individual, last name first) and address: 1. Debtor (if individual, last name first) and address: REUSTO, INC. 481081531 DBA POOL, SPA & FIRESIDE 481152984 1033 VERMONT LAWRENCE, KS 66044 _____ or SSN FEIN For filing officer 2. Secured Party and address (there may be more than one): (Type information incide gray area) FILED Commerce Bank & Trust DOUGLAS COUNTY KANSAS PO BOX 5049 Topeka, KS 66605 1995 JAN 31 PH 1: 21 SUE LEUSTIFTER REGISTER OF DEEDS 3. Assignee and address if applicable DOUGLAS CO. 000302 2-20-90 Filed with _REG OF DEEDS Original filing date 4. This statement refers to Original Financing Statement Number: 5. XXXA. Continuation The original Financing Statement bearing the The Secured Party of record has assigned D. Assignment the Secured Party's rights in the property described below under the Financing above file number is still effective. Statement bearing the above file number B. Termination The secured Party of record no longer claims a to the Assignee whose name and address security interest under the Financing Statement are shown above. bearing the above file number. E. Amendment The Financing Statement bearing the C. Release From the Collateral described in the Financing above file number is amended as set forth Statement bearing the above file number, the balow Secured Party of record releases the collateral below. 6. This area is for describing changes Number of Additional Sheets, if any. COMMERCE BANK & TRUST

Uniform Commercial Code — Statement of Continuation, Release, Amendment, Etc. — Form UCC-2

Signature of Debtor(s)
(Necessary if any amendment changes the classification or the value of collateral)