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

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 number or social security number.

				Prepaid account number 2542	
Debtor (if individual, last name first) and address:		ebtor (if individual	btor (if individual, last name first) and address:		
Floyd F. Torneden bute 5, Box 93 wrence, KS 66046					
	~ 99N F	EIN -		or SSN	
EIN	_ or SSN <u>512 — 34 - 9689 — _ </u> F			For filing offiœr	
2. Secured Party and address ((Type Information Insid	there may be more than one): e gray area)		DOLL	9014034 FILED	
Mercantile Bank of Lawrence N.A. formerly known as The First National Bank of Lawrence			DOUGLAS COUNTY KAMSAS 1997 JUN 12 PM 2: 32		
P.O. Box 428 Lawrence, Ks 66044		SUE NEUSTIFTER REGISTER OF DEEDS			
3. Assignee and address if app	olicable				
	The original Financing Statement Number: 9005180 The original Financing Statement bearing the above file number is still effective. The secured Party of record no longer claims a security interest under the Financing Statement bearing the above file number. From the Collateral described in the Financing Statement bearing the above file number, the Secured Party of record releases the collateral belonger.	D. As	inal filing date	The Secured Party of record has ass the Secured Party's rights in the pro- described below under the Financing Statement bearing the above file nu- to the Assignee whose name and ac- are shown above.	
6. This area is for describing of	hanges.			0	
		MERCANTII		dditional Sheets, if any. TERRI. W. PIPPERT VIO	
		- PRESIDENT Brad	les	L LENDING OFFICER R Julius On	
Sig (Necessary if any amendment	gnature of Debtor(s) changes the classification or the value of collateral)	To (iii)	Signature(s)	of Secured Party (ies)	