

Uniform Commercial Code — Financing Statement — Form UCC-1

47255 A

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 _____

1. Debtor (if individual, last name first) and address:

TUCKAWAY, L.C.
628 Vermont
P.O. Box 906
Lawrence, KS 66044

Debtor (if individual, last name first) and address:

FEIN 48-1176654 or SSN _____

FEIN _____ or SSN _____

2. Secured Party and address (there may be more than one):
(Type information inside gray area)

SOUTHLAND LIFE INSURANCE COMPANY
c/o Charter American Mortgage Co.
2001 Shawnee Mission Pkwy., Suite 210
Missions Hills, KS 66205

For filing officer

9014488
FILED
DOUGLAS COUNTY KANSAS
1997 NOV 12 PM 3:06
SUE NEUSTETER
REGISTER OF DEEDS

3. Assignee and address if applicable

4. Mark, if applicable: ☐ Products of collateral are also covered ☐ The debtor is a transmitting utility

5. (a) This financing statement covers the following types (or items) of property: (Describe)

See Exhibit A attached hereto and incorporated herein by this reference.

(b) If collateral is crops, the above described crops are growing or are to be grown on: (Describe real estate)

(c) If applicable, the above (goods are to be come fixtures on:) (timber is standing on:) (minerals or the like, including oil and gas, or accounts will be financed at the wellhead or minehead of the well or mine located on:) (Legal description of real estate)

Name of record owner: _____

6. If filing without debtor signature items a, b, c or d must be marked:

- a. ☐ Collateral already subject to a security interest in another jurisdiction when it was brought into this state, or when the debtor's location is changed to this state.
b. ☐ Collateral is proceeds of the original collateral in which a security interest was perfected
c. ☐ Collateral as to which the filing has lapsed.
d. ☐ The filing covers collateral acquired after a change of name identity or corporate structure of debtor

TUCKAWAY, L.C.

By: _____

THOMAS S. FRITZEL, PRESIDENT

SOUTHLAND LIFE INSURANCE COMPANY

By: _____

MARCIA CHARNEY, ATTORNEY FOR SECURED PARTY

Signature of Debtor

Signature of Secured Party (or assignee)

Form UCC-1 Form approved by Kansas Secretary of State

(1) FILING OFFICER COPY