1100	EINANCIN	C STA	TEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional] B. SEND ACKNOWLEDGMENT TO: (Name and Address) KeyBank National Association Mail Code: ID-56-PC-0125 431 Parkcenter Blvd. - P.O. Box 5278 Boise, ID 83705 ı

W2323900

EW 2323900 PG 1 DF 2 ERNEST D ROWLEY, WEBER COUNTY RECORDER 27-FEB-08 829 AM FEE \$12.00 DEP SPY REC FOR: KEYBANK

ACE IS FOR FILING OFFICE USE ONLY

		SPACE IS FO	K FILING OF FIEL CO	
DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor no fla. ORGANIZATION'S NAME	ame (1a or 1b) - do not abbreviate or combine names			
Vancott Bagley Cornwall and McCarthy 1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	MIDDLE NAME	
	CITY	STATE	POSTAL CODE	COUNTRY
1c. MAILING ADDRESS 50 S. Main Street, Suite 1600	Salt Lake City	UΤ	84144	USA
1d. SEE INSTRUCTIONS ADDIL INFO RE 1e. TYPE OF ORGANIZATION Corporation Corporation	υ τ	19. ORGANIZATIONAL ID #, if any 609160-0142		NONE
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert of	only one debtor name (2a or 2b) - do not abbreviate or com	bine names		
2a. ORGANIZATION'S NAME				
OR 2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME		SUFFIX
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
2d. SEE INSTRUCTIONS ADD'L INFO RE 2e. TYPE OF ORGANIZATION ORGANIZATION	ATION 21. JURISDICTION OF ORGANIZATION	2g. ORG	GANIZATIONAL ID#, if an	y II NON
DEBTOR				INON
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of AS	SSIGNOR S/P) - insert only one secured party name (3a o	7 36)		
3a. ORGANIZATION'S NAME				
KeyBank National Association OR 3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	SUFFIX	
	CITY	STATE	POSTAL CODE	COUNTRY
3c MAILING ADDRESS 36 S. State Street	Salt Lake City	υτ	84136	USA
4 This country of ATTEMENT covers the following colleteral:		·		

All Fixtures including Leasehold Improvements.

	CONSIGNEE/CONSIGNOR BAIL	EE/BAILOR SELLER/BUYER	AG. LIEN	NON-UCC FILING
	OCHOICHE BERNETH I	A DOLL OF DOD'T(S) on Deblor(s)	Atl Debtors 0	Debtor 1 Debtor 2
This FINANCING STATEMENT is to be filed [for record] (or recorded) ESTATE RECORDS. Attach Addendum	[if applicable] [ADDITIONAL FEE]	[optional]	All Debiois 1	Device 2
9 OPTIONAL SUER REFERENCE DATA				

51-22697

CC FINANCING STATE	MENT ADDENDUM						
LLOW INSTRUCTIONS (front and bar NAME OF FIRST DEBTOR (1a or 1	b) ON RELATED FINANCING STATI	MENT					
9a. ORGANIZATION'S NAME							
Vancott Bagley Cornwall and	McCarthy						
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX					
). MISCELLANEOUS:							
I. ADDITIONAL DEBTOR'S EXACT	FULL LEGAL NAME - insert only one n	ame (11a or 11b) - do not abbrev		ACE IS	FOR FILING OFFIC	E USE ON	LY
11a, ORGANIZATION'S NAME							
11b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIC	MIDDLE NAME		SUFF	ix
1c. MAILING ADDRESS		СПУ	STA	ATE F	OSTAL CODE	COUN	πRY
1d. SEE INSTRUCTIONS ADD'L INFO ORGANIZA' DEBTOR	RE 11e. TYPE OF ORGANIZATION	11f. JURISDICTION OF ORGA	NIZATION 119	ORGA	NIZATIONAL ID#, if an		NON
2. ADDITIONAL SECURED PAR 12a. ORGANIZATION'S NAME	RTY'S or ASSIGNOR S/P'S	NAME - insert only one name	(12a or 12b)				
			- Daii	DOLÉ NA	LASE	SUFF	ix
12b. INDIVIDUAL'S LAST NAME		FIRST NAME					
2c. MAILING ADDRESS		CITY	ST	ATE	POSTAL CODE	COUI	NTRY
3. This FINANCING STATEMENT covers collateral, or is filed as a fixture filing in the collateral of the collateral or is filed as a fixture filing in the collateral or is filed as a fixture filing in the collateral or is filed as a collateral or is filed as a collateral or is filed in the collateral or is filed as a collateral or is filed	g. RTAINMENT SUBDIVISION - T 11 2ND AMENDMENT, ereof as recorded in the office	16. Additional collateral descri	iption:				
		Į.					