

## **UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER (optional) Phone:(800) 331-3282 Fax: (818) 6	62-4141
B. SEND ACKNOWLEDGEMENT TO: (Name and Address)	17371 SERVICE FINANC
UCC Direct Services P.O. Box 29071	12867136
Glendale, CA 91209-9071	UTUT FIXTURE
File with: CC UT Sa	alt Lake, UT

10295397 12/10/2007 10:13 AM \$12.00 Book - 9546 Pa - 1367-1368 GARY W. OTT RECORDER, SALT LAKE COUNTY, UTAH UCC DIRECT SERVICES PO BOX 29071 GLENDALE CA 91209 BY: ZJM, DEPUTY - MA 2 P.

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one\_debtor name (1a or 1b) - do not abbreviate or combine names 1a. ORGANIZATION'S NAME OR 1b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME **SUFFIX** LYMAN **JAMES** 1c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 1574 TREEVIEW DR HOLLIDAY 84124 UT USA 1d. SEE INSTRUCTIONS ADD'L INFO RE 1e. TYPE OF ORGANIZATION 1f. JURISDICTION OF ORGANIZATION 1g. ORGANIZATIONAL ID #, if any ORGANIZATION NONE DEBTOR 2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names 2a. ORGANIZATION'S NAME OR 2b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX 2c. MAILING ADDRESS CITY POSTAL CODE \$TATE COUNTRY ADD'L INFO RE 2e. TYPE OF ORGANIZATION 2d. SEE INSTRUCTIONS 2f. JURISDICTION OF ORGANIZATION 2g. ORGANIZATIONAL ID #, if any ORGANIZATION NONE DEBTOR 3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one\_ secured party name (3a or 3b) 3a. ORGANIZATION'S NAME DB50 HVAC 2005-1 TRUST C/O SERVICE FINANCE CO **OR** 3b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME **SUFFIX** POSTAL CODE 3c. MAILING ADDRESS STATE COUNTRY 1956 NE 5TH AVE # 8 **BOCA RATON** 33431 USA FĻ

WINDOWS	LOAN AMOUNT: \$5,860.00
AAUADOAAO	ECULIA VINCOIAL. \$2,000.00

4. This FINANCING STATEMENT covers the following collateral:

5. ALTERNATIVE DESIGNATION (if applicable)	ONSIGNEE/CONSIGNOR	BAILEE/BAILOR	SELLER/BUYER	AG. LIEN	NON-UCC FILING
6. X This FINANCING STATEMENT is to be fill ESTATE RECORDS. Attach Addendum	e REAL 7. Check to REConficable) IADDITIONAL	DUEST SEARCH REPOR . FEE!	T(S) on Debtor(s) [optional]	All Debtors 0	Debtor 1 Debtor 2
8. OPTIONAL FILER REFERENCE DATA					
12867136		18760	539847		

18760539847

NAME OF FIRST DEBTOR (1a o 9a. ORGANIZATION'S NAME	r 1b) ON RELATED FINANCIN	G STATEMENT				
9b. INDIVIDUAL'S LAST NAME LYMAN	FIRST NAME JAMES	MIDDLE NAME,SU	FFIX			
MISCELLANEOUS 867136-UT-35 371 SERVICE FINANC						
760539847 with: CC UT Salt Lake, UT	r		THE ABO	VE SPACE IS FO	R FILING OFFICE US	E ONLY
ADDITIONAL DEBTOR'S EXACT 11a. ORGANIZATION'S NAME	T FULL LEGAL NAME - insert	only o <u>ne</u> name (11a or 11b) - d				
11b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE	MIDDLE NAME	
MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
	INFO RE 11e. TYPE OF ORGANIZ NIZATION DR	ZATION 11f. JURISDICTION C	OF ORGANIZATION	11g. OR	GANIZATIONAL ID#,	if any
ADDITIONAL SECURED F	PARTY'S <u>or</u> ASSIGNO	PR S/P's NAME - insert only one	_ name (12a or 12b)	·	·	
12b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE	NAME	SUFFIX
MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
This FINANCING STATEMENT cover collateral or is filed as a	rs timber to be cut or as	s-extracted 16. Additional collate	ral description:		!	
Description of real estate:						
escription: PARCEL#: 22 MAN 1574 TREE VIEW [ EC/TWNSHIP/RANGE: \$ 041290080000 Legal des ECOR LOT 5 BLK 1 10 A .66 FT N 198.2 FT E 96.6 SS STREET 0.38 AC, 37 96-8244 9414-9215	DR SALT LAKE CITY, U SEC 04 TWN T3S RNG I scription BEG 139.83 F1 C PLAT A BIG FIELDSU 56 FT S 198.2 FT TO BE	IT 84124 R1E T W FR JR W EG				
Name and address of a RECORD OW	VNFR of above-described real estate					
(if Debtor does not have a record int		17. Check <u>only</u> if appl	icable and check <u>only</u> on			
			or Trustee acting wit icable and check <u>only</u> on		erty held in trust or	Decedent's Est
		l <b></b>	ISMITTING UTILITY			