[redacted]

DELAWARE COUNTY IOWA
FILED
2001 JUL 20 PM 2:0
BOOK 2001 PAGE 2596
DEBORAH L. PETTIT
DELAWARE CO. RECORDER
20.11.00

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]
DAN WILLENBRING (800) 745-2017

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

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: ELLEN KENNEDY LIVING CENTER					
OR 1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME			SUFFIX
1c. MAILING ADDRESS: 1177 7TH ST., S.W.	CITY: DYERSVILLE	STATE: IA	POSTAL CODE: 52040		COUNTRY: USA
1d. TAX ID #: SSN OR EIN: 42-1472720	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION: NON PROFIT CORP	1f. JURISDICTION OF ORGANIZATION: IOWA	1g. ORGANIZATIONAL ID #, if any	[X] NONE

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	STATE	POSTAL CODE		COUNTRY
2d. TAX ID #: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any	[ ] NONE

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: AMERICAN TRUST & SAVINGS BANK				
OR 3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME		SUFFIX
3c. MAILING ADDRESS: PO BOX 307	CITY: DYERSVILLE	STATE: IA	POSTAL CODE: 52040-0307	COUNTRY: USA

4. This FINANCING STATEMENT covers the following collateral:

ALL OF DEBTOR'S INVENTORY, NOW OWNED OR HEREAFTER ACQUIRED; ALL OF DEBTOR'S ACCOUNTS, NOW EXISTING OR HEREAFTER ARISING, TOGETHER WITH ALL INTEREST OF DEBTOR IN ANY GOODS, THE SALE OR LEASE OF WHICH GIVE RISE TO ANY OF DEBTOR'S ACCOUNTS, AND ALL CHATTEL PAPER, DOCUMENTS AND INSTRUMENTS RELATING TO ACCOUNTS; ALL OF DEBTOR'S GENERAL ENTANGIBLES, NOW OWNED OR HEREAFTER ACQUIRED; ALL OF DEBTOR'S EQUIPMENT, NOW OWNED OR HEREAFTER ACQUIRED; TOGETHER WITH THE PROCEEDS, PRODUCTS, INCREASE, ISSUE, ACCESSIONS, ATTACHMENTS, ACCESSORIES, PARTS, ADDITIONS, REPAIRS, REPLACEMENTS, AND SUBSTITUTES OF, TO, AND FOR ALL OF THE FOREGOING.

5. ALTERNATIVE DESIGNATION [if applicable]: [ ] LESSEE/LESSOR [ ] CONSIGNEE/CONSIGNOR [ ] BAILEE/BAILOR [ ] SELLER/BUYER [ ] AG. LIEN [ ] NON-UCC FILING

6. [X] This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. Attach Addendum [if applicable]

7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [optional] [ADDITIONAL FEE] [ ] All Debtors [ ] Debtor 1 [ ] Debtor 2

8. OPTIONAL FILER REFERENCE DATA

FILING OFFICE COPY — NATIONAL UCC FINANCING STATEMENT (FORM UCC1) (REV. 07/29/98)

2001-2594

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT

9a. ORGANIZATION'S NAME

OR ELLEN KENNEDY LIVING CENTER

9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME,SUFFIX

10. MISCELLANEOUS:

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (11a or 11b) - do not abbreviate or combine names

11a. ORGANIZATION'S NAME

OR

11b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

11c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

11d. TAX ID #: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	11e. TYPE OF ORGANIZATION	11f. JURISDICTION OF ORGANIZATION	11g. ORGANIZATIONAL ID #, if any
				☐ NONE

12. ☐ ADDITIONAL SECURED PARTY'S or ☐ ASSIGNOR S/P'S NAME - insert only one name (12a or 12b)

12a. ORGANIZATION'S NAME

OR

12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

12c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

13. This FINANCING STATEMENT covers ☐ timber to be cut or ☐ as-extracted collateral, or is filed as a ☒ fixture filing.

14. Description of real estate:

Parcel "B" Of The NE1/4 SE1/4 In Sec. 36, T89N, R3W Of The 5th P.M., Delaware County, Iowa, according to plat recorded in Book 2001, Page 1929.

15. Name and address of a RECORD OWNER of above-described real estate (if Debtor does not have a record interest):

16. Additional collateral description:

17. Check only if applicable and check only one box.

Debtor is a ☐ Trust or ☐ Trustee acting with respect to property held in trust or ☐ Decedent's Estate

18. Check only if applicable and check only one box.

☐ Debtor is a TRANSMITTING UTILITY

☐ Filed in connection with a Manufactured-Home Transaction — effective 30 years

☐ Filed in connection with a Public-Finance Transaction — effective 30 years

FILING OFFICE COPY — NATIONAL UCC FINANCING STATEMENT ADDENDUM (FORM UCC1Ad) (REV. 07/29/98)