

200410060024
 Skagit County Auditor
 10/6/2004 Page 1 of 1 9:58AM

This Space Provided for Recorder's Use

When Recorded Return To:
Skagit State Bank, PO Box 285, Burlington, WA 98233
 Document Title(s) _____
 Grantor(s) _____
 Grantee(s) _____
 Legal Description _____
 Assessor's Property Tax Parcel or Account Number _____
 Reference Numbers of Documents Assigned or Released _____

UCC-5
 COUNTY AUDITOR
Change Form

1. Debtor(s): <i>(last name first, and mailing address(es))</i> Apter, Robert L 5A Beach Dr LaConner WA 98257	2. Secured Party(ies) and address(es): SKAGIT STATE BANK PO Box 285 Burlington WA 98233	3. Assignee(s) of Secured Party(ies) and address(es):
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4. This statement refers to original UCC-2 number 200002010093
 Dated Feb 1, 2000

5. Number of additional sheets attached: _____
6. CONTINUATION. The original UCC-2 between the foregoing Debtor(s) and Secured Party(ies) bearing auditors receiving number shown above is still effective.
- FULL ASSIGNMENT. All of the Secured Party's rights under the UCC-2 bearing auditors receiving number shown above have been assigned to the Assignee(s) whose NAME(S) AND ADDRESS(ES) APPEAR ABOVE.
- PARTIAL ASSIGNMENT. The Secured Party's rights under the UCC-2 bearing auditors receiving number shown above to the property DESCRIBED BELOW have been assigned to the Assignee(s) whose NAME(S) AND ADDRESS(ES) APPEAR ABOVE.
- AMENDMENT. UCC-2 bearing auditors receiving number shown above is amended AS SET FORTH BELOW.
- PARTIAL RELEASE. Secured Party(ies) releases the collateral DESCRIBED BELOW from the UCC-2 bearing auditors receiving number shown above.
- TERMINATION. Secured Party(ies) no longer claims a security interest under the UCC-2 bearing auditors receiving number shown above.

DESCRIPTION:

DATED: October 4, 2004

TYPE NAME(S) OF DEBTOR(S) (or assignor(s)) _____
 Skagit State Bank
Robert Apter
 TYPE NAME(S) OF SECURED PARTY(IES) (or assignee(s)) _____

SIGNATURE(S) OF DEBTOR(S) (or assignor(s)) _____
 (Required if amendment)

SIGNATURE(S) OF DEBTOR(S) (or assignee(s)) _____