

0711140029

Skagit County Auditor

MIDDLE NAME

WΑ

POSTAL CODE

98233

1 of

3 9:53AM

SUFFIX

COUNTRY

USA

	(front and back) C	CAREFULLY		11/14/20	07 Page	1 01	0.000
A. NAME & PHONE OF CO	ONTACT AT FILE	R [optional]					
and the second second	and the second						
B. SEND ACKNOWLEDGI	MENT TO: (Name	and Address)					
301 E Fairl	Operations Cenaven Ave. P O						
Burlington,	WA 98233	$\bigvee_{i=1}^{n}$		Į			
. · 				THE ABOVE	SPACE IS FO	R FILING ÖFFICE US	SE ONLY
1 DEBTOR'S EXACT FU	ILL LEGAL NAME	insert only one debto	r name (1a ör	1b) - do not abbreviate or combine names			
1a. ORGANIZATION'S NA			3.				
THE CHILDREN'S	MUSEUM OF S	SKAGIT COUNTY	À				
OR 16. INDIVIDUAL'S LAST N			7 9	FIRST NAME	MIDDLE	NAME	SUFFIX
1c MAILING ADDRESS				CITY	STATE	POSTAL CODE	COUNTRY
419 S 1ST ST			A CONTRACTOR OF THE SECOND SEC	MOUNT VERNON	WA	98273-3825	ĺ
1d. SEE INSTRUCTIONS	ADD'L INFO RE	1e. TYPE OF ORGANIA	ZATION	16 JURISDICTION OF ORGANIZATION	1g. ORG	ANIZATIONAL ID#, if any	, , , , , , , , , , , , , , , , , , ,
	ORGANIZATION DEBTOR	Association		WA	<u> </u>		non K
2. ADDITIONAL DEBTOR	S EXACT FULL	LEGAL NAME - inser	rt only one deb	tor name (2a or 2b) - do not abbreviate or comb	ine names		
2a. ORGANIZATION'S NA	ME						
OR 2b. INDIVIDUAL'S LAST N				FIRST NAME	MIDDLE	NAME	SUFFIX
2c. MAILING ADDRESS		<u></u>		СПУ	STATE	POSTAL CODE	COUNTRY
2d. SEE INSTRUCTIONS		2e. TYPE OF ORGANI	ZATION	21. JURISDICTION OF ORGANIZATION	2g. ORG	ANIZATIONAL ID#, if any	,
	ORGANIZATION				•		,

4. This FINANCING STATEMENT covers the following collateral:

301 E. Fairhaven Ave, P O Box 285

3a. ORGANIZATION'S NAME Skagit State Bank OR 36. INDIVIDUAL'S LAST NAME

3c. MAILING ADDRESS

All Fixtures; whether any of the foregoing is owned now or acquired later; all accessions, additions, replacements, and substitutions relating to any of the foregoing; all records of any kind relating to any of the foregoing; all proceeds relating to any of the foregoing (including insurance, general intangibles and accounts proceeds) Including but not limited to the following: All leasehold improvements on Parcel #23857.

Burlington

FIRST NAME

CITY

						N 197	
5.	ALTERNATIVE DESIGNATION [if applicable]:	LESSEE/LESSOR CONSIG	NEE/CONSIGNOR BAILEE/BA	AILOR SELLER/BUYER	AG. LIEN	NON-UC	C FILING
3.	This FINANCING STATEMENT is to be file ESTATE RECORDS. Attach Addendum	I [for record] (or recorded) in the REAL [if applicab	7. Check to REQUEST SEARCH	REPORT(S) on Debtor(s) [optional]	All Debtors	Debtor 1	Debtor 2
	ODTIONAL FILED DESCRIPTION DATA						

CC FINANCING STATEM						
DLLOW INSTRUCTIONS (front and back) NAME OF FIRST DEBTOR (1a or 1b)		MENT				
9% ORGANIZATION'S NAME						
THE CHILDREN'S MUSEUM OF	SKAGIT COUNTY					
96. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX				
). MISCELLANEOUS:						
				PACE IS FOR F	LING OFFICE	JSE ONLY
1. ADDITIONAL DEBTOR'S EXACT FU	LL LEGAL NAME - insert only one na	ame (11a or 11b) - do not abbrev	iate or combine name	<u> </u>		
112. ORGANIZATION'S NAME	The second secon					
R 11b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE NAME		SUFFIX
		7	İ			
Ic. MAILING ADDRESS		CITY		STATE POSTAL	CODE	COUNTRY
d SEE INSTRUCTIONS ADD'L INFO RE ORGANIZATION DEBTOR		111. JURISDICTION OF ORGA	NIZATION	11g. ORGANIZATIO	NAL ID #, if any	
ADDITIONAL SECURED PARTY	'S or ASSIGNOR S/P'S	NAME - insert only one name	(12a or 12b)			
128 ORGANIZATION'S NAME						
R						
12b. INDIVIDUAL'S LAST NAME		FIRST NAME	arrange and a second	MIDDLE NAME		SUFFIX
c. MAILING ADDRESS		CITY		STATE POSTAL	CODE	COUNTRY
This FINANCING STATEMENT covers to toollateral, or is filed as a fixture filing. Description of real estate:	mber to be cut or as-extracted	16. Additional collateral descri	ption		- 11-	<u> </u>
(Dk 12) Ptn E1/2 SE 1/4 Cascade 6 AF#8910190065. Except that p "CASCADE MALL BINDING SITE F follows: Commencing at the Sout said Binding Site plan, also being t said Lot 6; Thence South 0° 32′ 18″ East alo 6 and the West margin of Burlingte	portion of Lot 6. PLAN". described as heast Corner of Lot 5 of he Northeast corner of ng the East line of said Lot on Boulevard as shown on					
said binding site plan, A distance of Thence at a right angle South 89° to the true point of beginning;	27' 42" West 77.05 feet		. commenter (Coll LVX)		170 (16) (16) (17)	
Thence continuing South 89° 27' Thence North 13° 00' 35" West, Thence North 0° 32' 18" West 28	10.58 Feet; 3.18 feet;		200	711140	029	e.
Thence North 89° 27' 42" East, 1 Name and address of a RECORD OWNER of the body of the first of		11	Skagit /14/2007 Pag	County Au		53AM
					<u> </u>	<u> 10.</u>
			rustee acting with resp	ect to property heid	in trust or	Decedent's Esta
		18. Check only if applicable an				
	i	Debteries TRANSMITTIME	: HTILITY			사람 가장
		Debtor is a TRANSMITTING Filed in connection with a N		ansaction - effective	30 years	

NGA 10	ADDENDUM	,	1		
UCC FINANCING STATEM FOLLOW INSTRUCTIONS (front and back			:		
9. NAME OF FIRST DEBTOR (1a or 1b)		EMENT			
9a. ORGANIZATION'S NAME	OVACIT COUNTY				
THE CHILDREN'S MUSEUM OF		MIDDLE NAME, SUFFIX	1		
96. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIA			
40 MISOSI ANISOLIS					
10. MISCELLANEOUS:					
			er en		
			THE ABOVE SPAC	E IS FOR FILING OFFI	CE USE ONLY
11. ADDITIONAL DEBTOR'S EXACT FO	JLL LEGAL NAME - insert only one n	ame (11a or 11b) - do not abbre	viate or combine names		
11a. ORGANIZATION'S NAME	And the second of the second o				
OR 11b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDI	ENAME	SUFFIX
		1/	}		
11c. MAILING ADDRESS		СПУ	STATE	POSTAL CODE	COUNTRY
11d. SEE INSTRUCTIONS ADD'L INFO RE ORGANIZATIO	11e. TYPE OF ORGANIZATION	111 JURISDICTION OF ORGA	NIZATION 11g. C	ORGANIZATIONAL ID #, if a	any
DEBTOR	<u> </u>	<u> </u>			NONE
12. ADDITIONAL SECURED PART	Y'S or ASSIGNOR S/P'S	NAME - insert only one name	e (12a or 12b)		
12a. ORGANIZATION'S NAME					
OR 12b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDI	E NAME	SUFFIX
			Bernell of the Control of the Contro		
12c. MAILING ADDRESS		CITY	STATI	FOSTAL CODE	COUNTRY
13. This FINANCING STATEMENT covers Collateral, or is filed as a title filing.	timber to be cut or as-extracted	16. Additional collateral descri	iption		
14. Description of real estate:					
feet; Thence North 0° 32' 18" West, 3	18 64 feet	,			
Thence North 89° 27' 42" East 1	18.04 feet to a point which	ļ		ja Ja	
lies North 0° 32' 18" West from thence South 0° 32' 18" East, 7				.A.	
of beginning. Per survey recorded		<u>.</u>			
AF#200302190114		{	The second secon		
Parcel #P23857			green and the second	547 z	
) Mada kan dak	TO THE LOW LESS LAND TO A LAND	
			0 7 1 1 1 4 0 0 3		
				it County Audit	e a
			11/14/2007 Pa	5. 9 3. 5.	3 9:53AM
 Name and address of a RECORD OWNER (if Debtor does not have a record interest): 	of above-described real estate			·	O B.OOMIVI
		}			417 .5
		17. Check only if applicable a	nd check only one box.		7/5/14
e.		Debtor is a Trust or		property held in trust or	Decedent's Estate
		18. Check only if applicable a	nd check only one box.		
		Debtor is a TRANSMITTIN			
) }~~~ {	Manufactured-Home Transac	•	
		Filed in connection with a i	Public-Finance Transaction -	effective for 30 years	