



FILED SARPY CO. NE.  
 INSTRUMENT NUMBER  
2002 26869

2002 JUL 18 A 10:00

Counter John  
 Verify \_\_\_\_\_  
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**UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

**Bryan S. Mick, Esq.**  
**Croker, Huck, Kasher, DeWitt, Anderson & Gonderinger,**  
**P.C.**  
**2120 South 72nd Street, Suite 1250**  
**Omaha, Nebraska 68124**

*[Signature]*  
 REGISTER OF DEEDS

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 <b>B.H.I. Investment Company</b>					
OR					
1b. INDIVIDUAL'S LAST NAME					
1c. MAILING ADDRESS <b>11205 South 150th Street, Suite 100</b>		CITY <b>Omaha</b>	STATE <b>NE</b>	POSTAL CODE <b>68138</b>	COUNTRY <b>USA</b>
1d. TAX ID #: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION <b>Corporation</b>	1f. JURISDICTION OF ORGANIZATION <b>Omaha</b>	1g. ORGANIZATIONAL ID #, if any <input checked="" type="checkbox"/> 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					
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 <input type="checkbox"/> NONE	

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/F) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME <b>Homesteaders Life Company</b>					
OR					
3b. INDIVIDUAL'S LAST NAME					
3c. MAILING ADDRESS <b>2141 Grand Avenue, P.O. Box 1756</b>		CITY <b>Des Moines</b>	STATE <b>IA</b>	POSTAL CODE <b>50306</b>	COUNTRY <b>USA</b>

4. This FINANCING STATEMENT covers the following collateral:

**Fixtures, equipment, furnishings, other personal property, general intangibles and substitutions and proceeds of any of the foregoing, all of which are located on or utilized in connection with the real property legally described as - Lot 1, Highway Crossing, a Subdivision as surveyed, platted and recorded in Sarpy County, Nebraska, address: 11205 South 150th Street, Omaha, Nebraska 68138.**

**26869**

5. ALTERNATIVE DESIGNATION (if applicable)	<input type="checkbox"/> LESSEE/LESSOR	<input type="checkbox"/> CONSIGNEE/CONSIGNOR	<input type="checkbox"/> BAILEE/BAILOR	<input type="checkbox"/> SELLER/BUYER	<input type="checkbox"/> AG. LIEN	<input type="checkbox"/> NON-UCC FILING
6. <input checked="" type="checkbox"/> 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)		<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2	
8. OPTIONAL FILER REFERENCE DATA						