Inst # 2007015814 Tue Apr 03 16:04:21 CDT 2007 Caposms of Deeds Office Pages 3

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UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY) 100/1100 11000 1100 1111 1100/110 120/110 100/1 1111	Pages 3				
A. NAME & PHONE OF CONTACT AT FILER [option	onal]					
Bradley R. Geier, Esq.	214/745-5819					
B. SEND ACKNOWLEDGMENT TO: (Name and Ad	dress)					
Г						
Bradley R. Geier, Esq.						
Winstead Sechrest & Minick P.C.						
1201 Elm Street, Suite 5400						
Dallas, Texas 75270						
<u>L</u>] 1	HE ABOVE SPACE IS F	OR FILIN	G OFFICE USE C	ONLY	
1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debto	or name (1a or 1b) - do not abbreviate or combine	names			•	
1a. ORGANIZATION'S NAME						
CENTRE TERRACE LI	MITED PARTNERS	SHIP				
OR 1b. INDIVIDUAL'S LAST NAME					SUFFIX	
ic. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY	
c/o Concorde Management & Devel Suite 501	opment, Inc., 1225 L Street,	Lincoln	NE	68508	USA	
	PE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION	ig. ORG/	NIZATION ID#, if any		
ORGANIZATION DEBTOR	Limited Partnership	Nebraska	IZ N	ONE		
	<u> </u>					
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME 2a. ORGANIZATION'S NAME	- insert only one debtor name (2a or 2b) - do not a	bbreviate or combine names				
Za. URGANIZATION S NAME						
OR 2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME		SUFFIX	
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY	
ORGANIZATION	TE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATION ID#, if any			
DEBTOR					☐ NONE	
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIG	NEE of ASSIGNOR S/P) - insert only one secure	l party name (3a or 3b)				
32. ORGANIZATION'S NAME COLUMN FINANCIAL	, INC.					
OR 3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE 1	NAME	SUFFIX	
3c. MAILING ADDRESS		СПУ	STATE	POSTAL CODE	COUNTRY	
11 Madison Avenue		New York	NY	10010-3629	USA	
		2.00,7 = 0.00			<u> </u>	
 This FINANCING STATEMENT covers the following collateral. All assets and all personal property necovered. 	ow or hereafter owned by De	ebtor (the " <u>Collateral</u>	"). Pro	ceeds of the C	collateral are also	
5. ALTERNATIVE DESIGNATION [if applicable] LESSEE/L	LESSOR CONSIGNEE/CONSIGNOR	BAILEE/BAILOR SE	ELLER/BUY	ER AG. LIEN	NON-UCC FILING	
6. X This FINANCING STATEMENT is to be filed [for record] (or r Attach Adden	recorded) in the REAL 7. Check to REQUE	ST SEARCH REPORT(S) on Debt TEE] [optio		All Debtors	Debtor 1 Debtor 2	

OPTIONAL FILER REFERENCE DATA

County: Lancaster, Nebraska

3011-2421

			T ADDENDUM					
	OW INSTRUCTIONS (front ME OF FIRST DEBTOR		ATED FINANCING STATEMENT					
	9a. ORGANIZATION'S N				1			
	CENTR	E TERRA	ACE LIMITED					
	PARTNI	ERSHIP			•			
OR	9b. INDIVIDUAL'S LAS		TRST NAME	MIDDLE NAME, SUFFIX				
10. MI	ISCELLANEOUS:				ł			
							on com to non pr	T DIG OFFICE HOP
					I THE	ABOVE	SPACE IS FOR FI	LING OFFICE USE
11. дт	ODITIONAL DEBTOR'S	S EXACT FULL LEG	AL NAME - insert only one name (11a o	or 11h) - do not abbreviate or combine na	ames			
	11a. ORGANIZATION'S							
OR	11b. INDIVIDUAL'S LAS	T NAME		FIRST NAME		MIDDLE NA	AME	SUFFIX
llc. M	AILING ADDRESS			CITY		STATE	POSTAL CODE	COUNTRY
			L	ALC TIPLETON OF OPERATOR			AND A STORY HOW I'V	
ild. SE	EE INSTRUCTIONS	ORGANIZATION	11e. TYPE OF ORGANIZATION	11f, JURISDICTION OF ORGANIZA	ATION	-	NIZATION ID#, if any	
		DEBTOR				□ NO	NE	
12.	ADDITIONAL SEC	URED PARTY	S or ASSIGNOR S/P'S N	AME - insert only one name (12a or 12b	b)			<u></u> ,
	12a. ORGANIZATION'S	NAME						
OR	12b. INDIVIDUAL'S LAS	T NAME		FIRST NAME		MIDDLE NA	AME	SUFFIX

12c. M.	AILING ADDRESS			CITY		STATE	POSTAL CODE	COUNTRY
12 77	nis FINANCING STAT	rement [1	16. Additional collateral description:		<u> </u>		
L	as-extracted collateral, or i	s filed as a 🔀 fixtur	re filing					
14. De	escription of real estate:			1				
			and incorporated herein	L				
	by reference for	all purposes.						
]				
	ame and address of a RECOR we a record interest):	D OWNER of above-	described real estate (if Debtor does not					
	•			17. Check only if applicable and check				
			Debtor is a Trust or Trustee acting with respect to property held in trust or Decedent's Estate					
i r			i8. Check only if applicable and check only one box.					
				Debtor is a TRANSMITTING UT			-00	
				Filed in connection with a Manuf				
				Filed in connection with a Public-	rınance Trar	nsaction — effe	ctive 30 years	

Debtor Name: CENTRE TERRACE LIMITED PARTNERSHIP

Item No. 14 continued:

EXHIBIT A

Legal Description

Lots Three (3), Four (4), Eight (8), Nine (9) and Ten (10), Block Ninety-Eight (98), Original Plat of Lincoln, Lancaster County, Nebraska.