

J. A. Colan



UCC FINANCING STATEMENT AMENDMENT
FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER (optional)
Phone (800) 331-3282 Fax (818) 662-4141

B SEND ACKNOWLEDGEMENT TO (Name and Mailing Address) 23814 WELLS FARGO CM

CT Lien Solutions 30149669
P O Box 29071
Glendale, CA 91209-9071 NENE
FIXTURE

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE #
2007015814 04/03/07 CC NE Lancaster County Reg. of Deeds

1b This FINANCING STATEMENT AMENDMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS

2. TERMINATION. Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement

3. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law

4. ASSIGNMENT (full or partial) Give name of assignee in item 7a or 7b and address of assignee in 7c, and also give name of assignor in item 9

5. AMENDMENT (PARTY INFORMATION) This Amendment affects Debtor or Secured Party of record Check only one of these two boxes

Also check one of the following three boxes and provide appropriate information in items 6 and/or 7

CHANGE name and/or address. Give current record name in item 6a or 6b, also give new name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c

DELETE name Give record name to be deleted in item 6a or 6b

ADD name Complete item 7a or 7b and also item 7c, also complete items 7d-7g (if applicable)

6. CURRENT RECORD INFORMATION:

6a ORGANIZATION'S NAME
CENTRE TERRACE LIMITED PARTNERSHIP

OR

6b INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

7 CHANGED (NEW) OR ADDED INFORMATION:

7a ORGANIZATION'S NAME

OR

7b INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

7c MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY

7d SEE INSTRUCTION ADD'L INFO RE ORGANIZATION DEBTOR 7e TYPE OF ORGANIZATION 7f JURISDICTION OF ORGANIZATION 7g ORGANIZATIONAL ID #, if any NONE

8 AMENDMENT (COLLATERAL CHANGE): check only one box.

Describe collateral deleted or added, or give entire restated collateral description, or describe collateral assigned.

9 NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor if this is an Assignment) If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here and enter name of DEBTOR authorizing this Amendment

9a ORGANIZATION'S NAME
COLUMN FINANCIAL, INC

OR

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

10 OPTIONAL FILER REFERENCE DATA
30149669 Debtor Name CENTRE TERRACE LIMITED PARTNERSHIP AU02058LOAN096000150 096000150



7.9 2.11.

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

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11 INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form)

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12. NAME of PARTY AUTHORIZING THIS AMENDMENT (same as Item 9 on Amendment form)

12a ORGANIZATION'S NAME
COLUMN FINANCIAL, INC

OR

12b INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX
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13 Use this space for additional information

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___ Description: SEE ATTACHED

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.