

MR 59087-MS

# UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

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| <p>A. NAME &amp; PHONE OF CONTACT AT FILER [optional]<br/> <b>Penny Devlin 541-523-4079</b></p>  |
| <p>B. SEND ACKNOWLEDGMENT TO: (Name and Address)</p> <p><b>Pacific Intermountain Mortgage Co.</b><br/> <b>2420 Main St.</b><br/> <b>Baker City, OR 97814</b></p> |

State of Oregon, County of Klamath  
 Recorded 02/28/2003 3:17 p.m.  
 Vol M03 Pg 12692  
 Linda Smith, County Clerk  
 Fee \$ 21.00 # of Pgs 1

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

|   |   |
|---|---|
| 1a. INITIAL FINANCING STATEMENT FILE #<br><b>Vol # M02 Page 56653</b> | 1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS.<br><input checked="" type="checkbox"/> |
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| 2. <input type="checkbox"/> <b>TERMINATION:</b> Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement  |
| 3. <input type="checkbox"/> <b>CONTINUATION:</b> Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law. |

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| 4. <input type="checkbox"/> <b>ASSIGNMENT</b> (full or partial): Give name of assignee in item 7a or 7b and address of assignee in item 7c; and also give name of assignor in item 9.  |
| 5. <b>AMENDMENT (PARTY INFORMATION):</b> This Amendment affects <input type="checkbox"/> Debtor or <input type="checkbox"/> Secured Party of record. Check only <u>one</u> of these two boxes.<br>Also check <u>one</u> of the following three boxes and provide appropriate information in items 6 and/or 7.<br><input type="checkbox"/> <b>CHANGE</b> 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. <input type="checkbox"/> <b>DELETE</b> name: Give record name to be deleted in item 6a or 6b. <input type="checkbox"/> <b>ADD</b> name: Complete item 7a or 7b, and also item 7c; also complete items 7d-7g (if applicable). |

|                                       |                              |            |                    |
|---------------------------------------|------------------------------|------------|--------------------|
| 6. <b>CURRENT RECORD INFORMATION:</b> |                              |            |                    |
| 6a. ORGANIZATION'S NAME               |                              |            |                    |
| OR                                    | 6b. INDIVIDUAL'S LAST NAME   | FIRST NAME | MIDDLE NAME SUFFIX |
|                                       | <b>Sunnyfield Farms Inc.</b> |            |                    |

|   |                            |                                 |                                  |
|---|----------------------------|---------------------------------|----------------------------------|
| 7. <b>CHANGED (NEW) OR ADDED INFORMATION:</b> |                            |                                 |                                  |
| 7a. ORGANIZATION'S NAME                       |                            |                                 |                                  |
| OR  | 7b. INDIVIDUAL'S LAST NAME | FIRST NAME                      | MIDDLE NAME SUFFIX               |
| 7c. MAILING ADDRESS                           |                            | CITY                            | STATE POSTAL CODE COUNTRY        |
| ADD'L INFO RE ORGANIZATION DEBTOR             |                            | 7e. TYPE OF ORGANIZATION        | 7f. JURISDICTION OF ORGANIZATION |
|   |                            | 7g. ORGANIZATIONAL ID #, if any | <input type="checkbox"/> NONE    |

|   |  |
|---|--|
| 8. <b>AMENDMENT (COLLATERAL CHANGE):</b> check only <u>one</u> box.   |  |
| Describe collateral <input checked="" type="checkbox"/> deleted or <input type="checkbox"/> added, or give entire <input type="checkbox"/> restated collateral description, or describe collateral <input type="checkbox"/> assigned. |  |
| <b>Wade wheel line 720' with 5" mainline and 58" wheels<br/>(2) used gun carts</b>  |  |

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|--|---|--|--|
| 9. <b>NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT</b> (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 <input type="checkbox"/> and enter name of DEBTOR authorizing this Amendment. |   |  |  |
| 9a. ORGANIZATION'S NAME  |   |  |  |
| OR   | 9b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX    |  |  |
|  | <b>Pioneer Bank, c/o Pacific Intermountain Mortgage Co.</b> |  |  |

10. OPTIONAL FILER REFERENCE DATA