2007-004782 Klamath County, Oregon

	03/20/2007 09:29:38 AM	Fee: \$21.0
JCC FINANCING STATEMENT AMENDMENT OLLOW INSTRUCTIONS (front and back) CAREFULLY		
A. NAME & PHONE OF CONTACT AT FILER [optional]	Courses the Managed Advantage of Table 17	
Kathy Johnson 541-774-1452		
3. SEND ACKNOWLEDGEMENT TO: (Name and Address)		
South Valley Bank & Trust		
891 O'Hare Parkway		
Medford, OR 97504		
Modicia, Okt 37301		
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<u> </u>	THE ABOVE SPACE IS FOR FILING OFFICE US	SE ONLY
a. INITIAL FINANCING STATEMENT FILE #	1b. This FINANCING STATEMEN to be filed [for record] (or record)	
Vol. M02 Page 28692-93	REAL ESTATE RECORDS.	
	a is terminated with respect to security interest(s) of the Secured Party authorizing this Ter	
 CONTINUATION: Effectiveness of the Financing Statement identified above for the additional period provided by applicable law. 	eve with respect to security interest(s) of the Secured Party authorizing this Continuation St	atement is continued
ASSIGNMENT: (full or partial): Give name of assignee in item 7a or 7b and	d address of assignee in item 7c; and also give name of assignor in item 9.	
AMENDMENT (PARTY INFORMATION): This Amendment affects Deb	otor 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 it		ow 7- ou7h and also items
CHANGE name and/or address: Give current record name in item 6a or 6b; all name (if name change) in item 7a or 7b and/or new address (if address change) in it		
CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME	A 7 / B	
Pelican Butte Oil, Rogue Valley Oil Co.		
6b. INDIVIDUAL'S LAST NAME	FIRST NAME MIDDLE NAME	SUFFIX
CHANGED (NEW) OR ADDED INFORMATION:		
7a. ORGANIZATION'S NAME	2	
·		ISUFFIX
DR 75 INDIVIDUAL'S LAST NAME	FIRST NAME MIDDLE NAME	JOURNA
7b. INDIVIDUAL'S LAST NAME		
	FIRST NAME MIDDLE NAME CITY STATE POSTAL CODE	COUNTRY
7c. MAILING ADDRESS 7d. ADD'L. INFO RE 7e. TYPE OF ORGANIZATION	CITY STATE POSTAL CODE	COUNTRY
7b. INDIVIDUAL'S LAST NAME 7c. MAILING ADDRESS 7d. ADD'L. INFO RE ORGANIZATION ORGANIZATION DEBTOR ADDRESS ADDRESS ADD'L. INFO RE ORGANIZATION DEBTOR ADDRESS ADDR	CITY STATE POSTAL CODE	COUNTRY t, if any
7c. MAILING ADDRESS 7d. ADD'L INFO RE ORGANIZATION ORGANIZATION DEBTOR 8. AMENDMENT (COLLATERAL CHANGE): check only one box.	CITY STATE POSTAL CODE N 7f. JURISDICTION OF ORGANIZATION 7g. ORGANIZATIONAL ID #	COUNTRY
7c. MAILING ADDRESS 7d. ADD'L INFO RE 7e, TYPE OF ORGANIZATION DEBTOR DEBTOR	CITY STATE POSTAL CODE N 7f. JURISDICTION OF ORGANIZATION 7g. ORGANIZATIONAL ID #	COUNTRY t, if any
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ADD'L. INFO RE ORGANIZATION ORGANIZATION DEBTOR 3. AMENDMENT (COLLATERAL CHANGE): check only one box. Describe collateral deleted or added, or give entire restated collateral collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, or gas, or organization of the property of the collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, or gas, or organization or organization or organization.	To all description, or describe collateral assigned. STATE POSTAL CODE 7g. ORGANIZATIONAL ID # all description, or describe collateral assigned.	COUNTRY #, if any □ NONE
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