

MTC79379

PLEASE COMPLETE THIS INFORMATION

2007-010577  
Klamath County, Oregon

RECORDING REQUESTED BY:

Farm Credit West, PCA



00024539200700105770020025

06/12/2007 11:19:30 AM

Fee: \$26.00

AND WHEN RECORDED MAIL TO:

Farm Credit West, PCA  
19628 Industry Parkway Drive  
Bakersfield, CA 93308

THIS SPACE FOR RECORDER'S USE ONLY

Mebane, Dwight G. – UCC 3 / Fixture Filing- Klamath County

- |              |   |
|--------------|---|
| _____        | Grant Deed  |
| _____        | Deed of Trust                                       |
| _____        | Acknowledgment of Satisfaction<br>Of Judgment       |
| _____        | Substitution of Trustee and<br>Deed of Reconveyance |
| _____        | UCC – 1 – Fixture Filing                            |
| <u>  X  </u> | <b>UCC – 3 – Financing Statement Amendment</b>      |
| _____        | Other – UCC Subordination Agreement                 |

210

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

|  |
|--|
| A. NAME & PHONE OF CONTACT AT FILER [optional] |
| Melinda Mello (661) 399-7360                   |
| B. SEND ACKNOWLEDGMENT TO: (Name and Address)  |
| Farm Credit West, PCA                          |
| BAKERSFIELD Branch                             |
| 19628 Industry Park Drive                      |
| Bakersfield, CA 93308                          |

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

|  |                                   |                          |                                  |  |   |
|--|-----------------------------------|--------------------------|----------------------------------|--|---|
| 1a. INITIAL FINANCING STATEMENT FILE #   |                                   |                          |                                  | 1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. |   |
| Vol M05, Page 03454-62 (Filed on 01/14/2005)   |                                   |                          |                                  | <input checked="" type="checkbox"/>  |   |
| 2. <input type="checkbox"/> 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. <input type="checkbox"/> CONTINUATION: 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.   |                                   |                          |                                  |  |   |
| 4. <input type="checkbox"/> ASSIGNMENT (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. AMENDMENT (PARTY INFORMATION): This Amendment affects <input type="checkbox"/> Debtor or <input type="checkbox"/> Secured Party of record. Check only one of these boxes. Also check one of the following three boxes and provide appropriate information in items 6 and/or 7.  |                                   |                          |                                  |  |   |
| <input type="checkbox"/> 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. <input type="checkbox"/> DELETE name: Give record name to be deleted in item 6a or 6b. <input type="checkbox"/> 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  |                                   |                          |                                  |  |   |
| 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 INSTRUCTIONS   | ADD'L INFO RE ORGANIZATION DEBTOR | 7e. TYPE OF ORGANIZATION | 7f. JURISDICTION OF ORGANIZATION |  | 7g. ORGANIZATIONAL ID.#, if any <input type="checkbox"/> NONE |

8. AMENDMENT (COLLATERAL CHANGE): check only one box. Describe collateral ☐ deleted or ☒ added, or give entire ☐ restated collateral description, or describe collateral ☐ assigned.

Add the following fixture location, to apply to all previously described collateral:

Parcels 1 and 2 of Land Partition 15-06, said Land Partition situated in the S1/2 of Section 28, Township 33 South, Range 7 ½ East of the Willamette Meridian, Klamath County, Oregon.

|   |                            |                                   |                               |
|---|----------------------------|-----------------------------------|-------------------------------|
| 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 <input checked="" 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 |
|   | Mebane                     |                                   | Dwight G.                     |
| 10. OPTIONAL FILER REFERENCE DATA   |                            |                                   |                               |
| Customer No. 0004344014   |                            | Primary Debtor: Mebane, Dwight G. | June 05, 2007                 |