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Fee: \$37.00

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER (optional)
SHERI MAZOUR 402-462-4129 EXT 225

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

T-L CREDIT COMPANY
 PO BOX 1386
 HASTINGS, NE 68902

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE #

2007-006574 FILED 4/10/2007

1b. This FINANCING STATEMENT AMENDMENT is
 to be filed (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 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 item 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 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
GEANEYFIRST NAME
JEREMIAHMIDDLE NAME
H

SUFFIX

7. CHANGED (NEW) OR ADDED INFORMATION:

7a. ORGANIZATION'S NAME

OR 7b. INDIVIDUAL'S LAST NAME
GEANEYFIRST NAME
SUSANMIDDLE NAME
F

SUFFIX

7c. MAILING ADDRESS

18233 CHIN ROAD

CITY

KLAMATH FALLS

STATE

OR 97603

POSTAL CODE

COUNTRY
USA7d. 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

1 - 865/965P 7 TOWER T-L LINEAR IRRIGATION SYSTEM INCLUDING 1-ISUZU 4LE2 HYD PUMPING UNIT AND ALL
 OTHER ACCESSORIES S/N 24306; 1560'-8" CLASS 125 GASKETED PVC PIPE

Location: SW1/4 and NW1/4 of Section 28 and NW1/4 of Section 33-T40S-R10E

KLAMATH COUNTY, OREGON
LOAN #19089. 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

T-L CREDIT COMPANY, A DIVISION OF T-L IRRIGATION CO.

OR 9b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

10. OPTIONAL FILER REFERENCE DATA