



**UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional] <b>(704) 549-1009</b>	
B. SEND ACKNOWLEDGMENT TO: (Name and Address) <b>FINANCIAL FEDERAL CREDIT INC. 10715 DAVID TAYLOR DR. SUITE 550 CHARLOTTE NC 28262</b>	

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME <b>VIRGINIA TRANSPORTATION CORP.</b>					
OR	1b. INDIVIDUAL'S LAST NAME				
	FIRST NAME	MIDDLE NAME	SUFFIX		
1c. MAILING ADDRESS <b>1600 FLAT RIVER ROAD</b>		CITY <b>COVENTRY</b>	STATE <b>RI</b>	POSTAL CODE <b>02816-8904</b>	COUNTRY <b>USA</b>
1d. <b>SEE INSTRUCTIONS</b>	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION <b>CORPORATION</b>	1f. JURISDICTION OF ORGANIZATION <b>RHODE ISLAND</b>	1g. ORGANIZATIONAL ID #, if any <b>RI82449</b>	<input type="checkbox"/> NONE

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME					
OR	2b. INDIVIDUAL'S LAST NAME				
	FIRST NAME	MIDDLE NAME	SUFFIX		
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
2d. <b>SEE INSTRUCTIONS</b>	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any	<input type="checkbox"/> NONE

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME <b>FINANCIAL FEDERAL CREDIT INC.</b>					
OR	3b. INDIVIDUAL'S LAST NAME				
	FIRST NAME	MIDDLE NAME	SUFFIX		
3c. MAILING ADDRESS <b>10715 DAVID TAYLOR DR. SUITE 550</b>		CITY <b>CHARLOTTE</b>	STATE <b>NC</b>	POSTAL CODE <b>28262</b>	COUNTRY <b>USA</b>

4. This FINANCING STATEMENT covers the following collateral:  
**All assets now owned or hereafter acquired, including without limitation all property described below or on any schedule hereto, together with all attachments, accessions and accessories thereto, and all proceeds thereof.**

5. ALTERNATIVE DESIGNATION [if applicable]:	<input type="checkbox"/> LESSEE/LESSOR	<input type="checkbox"/> CONSIGNEE/CONSIGNOR	<input type="checkbox"/> BAILEE/BAIOLR	<input type="checkbox"/> SELLER/BUYER	<input type="checkbox"/> AG. LIEN	<input type="checkbox"/> NON-UCC FILING
6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (or recorded) in the REAL ESTATE RECORDS. Attach Addendum [if applicable]	<input type="checkbox"/> 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [optional] [ADDITIONAL FEE]	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2		

**SOS Rhode Island 66-42720 tgi P**

### SCHEDULE "A"

This schedule is attached to and becomes part of a certain UCC Financing Statement wherein the Secured Party is Financial Federal Credit Inc. and the Debtor(s) is/are VIRGINIA TRANSPORTATION CORP..

<u>QUANTITY</u>	<u>YEAR</u>	<u>MODEL</u>	<u>DESCRIPTION OF COLLATERAL</u>	<u>SERIAL NUMBER</u>
One (1)	2007	4900FA	Western Star Tractor with attached	5KKHAECK17PX29375
One (1)		SL	Cottrell 3-Car Headrack	
One (1)	2007	C10LTB	Cottrell Car Hauler Trailer	5E0AJ14407G135601

Including all attachments, accessions and accessories to, and all proceeds of, all of the foregoing, including without limitation all insurance proceeds and all rental proceeds, accounts and chattel paper arising out of or related to the sale, lease, rental or other disposition thereof.