	IG STATEMEN		ENT				
A. NAME & PHONE OF	NS (front and back) CAF CONTACT AT FILER [o	optional] (201) 801-	0300				
	CIAL FEDER	,	INC				
	ANK W. BURF		07666				
L				THE ABOVE SPA	ACE IS FO	R FILING OFFICE US	SE ONLY
a. INITIAL FINANCING STA	ATEMENT FILE#	4/	23/2002		r to b	s FINANCING STATEMEN e filed [for record] (or rec	
·	Effectiveness of the Financin		bove is terminated with respect	o security interest(s) of the		AL ESTATE RECORDS. Ty authorizing this Termina	ation Statement.
CONTINUATION:	Effectiveness of the Finan	icing Statement identific	ed above with respect to securit	/ interest(s) of the Secured	Party author	orizing this Continuation S	Statement is
	., .,	F F	and address of assignee in item	7c' and also size news -4	acelene-1	itam 0	
<u> </u>	II or partial): Give name of a		_	n 7c; and also give name of ty of record. Check only o		****	
	lowing three boxes and provi			ty of fecola. Check only of	<u>ne</u> or meser	wo boxes.	
CHANGE name and/or in regards to changing	r address: Please refer to the o the name/address of a party.	detailed instructions	DELETE name: Given to be deleted in item		ADDr	iame: Complete item 7a or 7 omplete items 7e-7g (ifappli	7b, and also item 7 icable).
CURRENT RECORD II							
6a. ORGANIZATION'S	NAME						
66. INDIVIDUAL'S LAS	ST NAME		FIRST NAME		MIDDLE	NAME	SUFFIX
	ADDED INFORMATION:						
7a. ORGANIZATION'S	NAME						
	ET NAME		FIRST NAME		MIDDLE	NAME	SUFFIX
7b. INDIVIDUAL'S LAS	AT TAVIALE						
76. INDIVIDUAL'S LAS) I IAVINC					IDOCTAL CODE	COUNTR
75. INDIVIDUAL'S LAS	ZE INDING		CITY		STATE	POSTAL CODE	
MAILING ADDRESS							
MAILING ADDRESS	ADD'L INFO RE 7e. T ORGANIZATION	TYPE OF ORGANIZATIO		ORGANIZĂTION		ANIZATIONAL ID #, if any	
MAILING ADDRESS SEE INSTRUCTIONS	ADD'L INFO RE 7e. T ORGANIZATION DEBTOR			ORGANIZATION			
MAILING ADDRESS SEEINSTRUCTIONS AMENDMENT (COLL	ADD'L INFO RE 7-e. T ORGANIZATION DEBTOR LATERAL CHANGE): che	eck only <u>one</u> box.	N 7f. JURISDICTION OF				
MAILING ADDRESS SEEINSTRUCTIONS AMENDMENT (COLL	ADD'L INFO RE 7-e. T ORGANIZATION DEBTOR LATERAL CHANGE): che	eck only <u>one</u> box.					
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MAILING ADDRESS SEEINSTRUCTIONS AMENDMENT (COLL Describe collateral describe)	ADD'L INFO RE 7e. T ORGANIZATION DEBTOR ATERAL CHANGE): chi	reck only <u>one</u> box. give entire restated on	7f. JURISDICTION OF	a collateral assigned.	7g. ORG	ANIZATIONAL ID#, if any	. □1
MAILING ADDRESS SEE INSTRUCTIONS AMENDMENT (COLL Describe collateral describes coll	ADD'L INFO RE 7e. TORGANIZATION ORGANIZATION LATERAL CHANGE): cheleted or added, or gi	eck only one box. give entire restated or	7f. JURISDICTION OF old and ol	a collateral assigned.	7g. ORG	ANIZATIONAL ID#, if any	. □1
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NAME OF SECURED adds collateral or adds the	ADD'L INFO RE 7e. TORGANIZATION DEBTOR ATERAL CHANGE): che leleted or added, or gi	eck only one box. give entire restated or AUTHORIZING THIS ais is a Termination author	7f. JURISDICTION OF ollateral description, or describe ollateral description oll	a collateral assigned.	7g. ORG	ANIZATIONAL ID#, if any	
NAME OF SECURED adds collateral or adds the	ADD'L INFO RE 7e. TORGANIZATION DEBTOR ATERAL CHANGE): che leleted or added, or gi	eck only one box. give entire restated or AUTHORIZING THIS ais is a Termination author	7f. JURISDICTION OF ollateral description, or describe ollateral description oll	a collateral assigned.	7g. ORG	an Amendment authorized rizing this Amendment.	

SOS RI 07-075468 dja NEW ENGLAND RIDES AND AMUSEMENTS, INC. AND ROCKWELL AM