| OLL | OW INSTRUCTIONS | S STATEMENT 6 (front and back) CAREFULLY DNTACT AT FILER (optional) | | | | |
|--|--|--|--|--|--|--|
| | ry Ann Martineau | 401 276-6403 | | | | |
| 3. S | END ACKNOWLEDGE | MENT TO: (Name and Address) |] | | | |
| | Mary Ann Mar Edwards Angel 2800 Financial Providence, RI | | l | | | |
| | | | | | | |
| | <u> </u> | | | VE SPACE IS FO | R FILING OFFICE U | SE ONLY |
| | EBTOR'S EXACT FOR THE STATE OF | ULL LEGAL NAME - insert only one debtor name (1 | a or 1b) - do not abbreviate or combine names | | | |
| | ocean Tides Inc | | | | | |
| ЭR | 16. INDIVIDUAL'S LAST | | FIRST NAME | MIDDLE | NAME | SUFFIX |
| | | | | | | |
| lç. M | AILING ADDRESS | | CITY | STATE | POSTAL CODE | COUNTRY |
| 635 | Ocean Road | | Narragansett | RI | 02882 | |
| id. T | AX ID #: SSN OR EIN | ADD'L INFO RE 19. TYPE OF ORGANIZATION ORGANIZATION | 1f. JURISDICTION OF ORGANIZATION | 1 - | NIZATIONAL ID #, if an | |
| | | DEBTOR Non-Profit Corporation | Rhode Island | 285 | 01 | N |
| 2. A | | R'S EXACT FULL LEGAL NAME - insert only one | debtor name (2a or 2b) - do not abbreviate or c | combine names | | |
| | 2a. ORGANIZATION'S N | AME | | | | |
| OR | 2b, INDIVIDUAL'S LAST | NAME | FIRST NAME | MIDDLE | NAME | SUFFIX |
| | ZB. III DIVIDONEO ENO: | 11711111 | | | | |
| | | | | i | | |
| 2c. l | MAILING ADDRESS | | CITY | STATE | POSTAL CODE | COUNTRY |
| 2c. l | MAILING ADDRESS | | СІТУ | | | |
| | AX ID #: SSN OR EIN | ADD'L INFO RE 2e. TYPE OF ORGANIZATION ORGANIZATION | CITY 2f. JURISDICTION OF ORGANIZATION | | POSTAL CODE | ny |
| 2d. | AX ID #: SSN OR EIN | ORGANIZATION DEBTOR | 2f. JURISDICTION OF ORGANIZATION | 2g. ORG | | |
| 2d. | AXID#: S\$NOREIN | ORGANIZATION DEBTOR NAME (or NAME of TOTAL ASSIGNEE of ASSIGNEE) | 2f. JURISDICTION OF ORGANIZATION | 2g. ORG | | ny |
| 2d. | AX ID #: SSN OR EIN ECURED PARTY'S 3a. ORGANIZATION'S N | ORGANIZATION DEBTOR NAME (or NAME of TOTAL ASSIGNEE of ASSIGNEE) AME | 2f. JURISDICTION OF ORGANIZATION OR S/P) - insert only one secured party name (3a) | 2g. ORG | | ny |
| 2d. | ECURED PARTY'S 3a. ORGANIZATION'S N The Bank of Ne | ORGANIZATION DEBTOR S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNE AME W York Trust Company, N.A., as Ti | 2f. JURISDICTION OF ORGANIZATION OR S/P) - insert only one secured party name (3a) | 2g. ORG | ANIZATIONAL ID #, if ar | ny |
| 2d. 3. S | AX ID #: SSN OR EIN ECURED PARTY'S 3a. ORGANIZATION'S N | ORGANIZATION DEBTOR S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNE AME W York Trust Company, N.A., as Ti | 2f. JURISDICTION OF ORGANIZATION OR S/P) - insert only one secured party name (3a) | 2g. ORG/ a or 3b) | ANIZATIONAL ID #, if ar | ny N |
| 2d. 3. S | ECURED PARTY'S 3a. ORGANIZATION'S N The Bank of Ne | ORGANIZATION DEBTOR S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNE AME W York Trust Company, N.A., as Ti | 2f. JURISDICTION OF ORGANIZATION OR S/P) - insert only one secured party name (3a) | 2g. ORG/ a or 3b) | ANIZATIONAL ID #, if ar | SUFFIX |
| 2d. 3. S | ECURED PARTY'S 3a. ORGANIZATION'S N The Bank of Ne 3b. INDIVIDUAL'S LAST | ORGANIZATION DEBTOR S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNEE AME W York Trust Company, N.A., as Trusted Company, N. | 2f. JURISDICTION OF ORGANIZATION OR S/P) - insert only one secured party name (3a rustee FIRST NAME CITY | 2g. ORG/ a or 3b) MIDDLE | NAME POSTAL CODE | SUFFIX |
| 3c. 22 4.11 All and Ed | ECURED PARTY'S 3a. ORGANIZATION'S N The Bank of Ne 3b. INDIVIDUAL'S LAST MAILING ADDRESS 2 Berkeley Street, 2 his Financing statem Gross Receipts t between the Del ty pursuant to tha uring the loan of ucational Facility Indenture. Gros luding, but witho an Agreement) ar ounts receivable, eafter coming in | ORGANIZATION DEBTOR S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNE W York Trust Company, N.A., as Towns of Total Assignee of Assignee w York Trust Company, N.A., as Towns of T | PR S/P) - insert only one secured party name (3c) rustee FIRST NAME CITY Boston ertain Loan Agreement dated as lucational Building Corporation of July 1, 2006 (the "Indenture" 17,500,000 Rhode Island Health ol Program Issue, Series 2006A nues, income and other moneys going, revenues derived from the for and all rights to receive the second or held or hereafter acquired by | a or 3b) MIDDLE STATE MA of July 1, 200 (the "Assigno") between Assignorated and any additive received by one operations of ame whether its of such righty the Debtor; processors and the such righty the Debtor; processors are such as a such righty the Debtor; processors are such as a such righty the Debtor; processors are such as a | POSTAL CODE 02116 6 (the "Loan Ag ir") and assigned signor and Secur nal Building Cor cional Bonds issu r on behalf of the f the Project (as in the form of ac ts, whether now provided, howev | countre USA greement") by to Secured red Party, reporation's ued pursuant e Debtor defined in the counts, existing or ter, that gifts |
| 26. 3. S OR 3c. 22 4. 1 All and beine Lo her | ECURED PARTY'S 3a. ORGANIZATION'S N The Bank of Ne 3b. INDIVIDUAL'S LAST MAILING ADDRESS 2 Berkeley Street, 2 his Financing statem Gross Receipts t between the Del ty pursuant to tha uring the loan of ucational Facility Indenture. Gros luding, but witho an Agreement) ar ounts receivable, eafter coming int | ORGANIZATION DEBTOR S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNAME w York Trust Company, N.A., as Townson of Total Assignee of Assignation of Total Assignation o | PR S/P) - insert only one secured party name (3c) rustee FIRST NAME CITY Boston ertain Loan Agreement dated as lucational Building Corporation of July 1, 2006 (the "Indenture" 17,500,000 Rhode Island Health ol Program Issue, Series 2006A nues, income and other moneys going, revenues derived from the for and all rights to receive the sign or other rights, and the proceed or held or hereafter acquired by eretofore or hereafter made and | a or 3b) MIDDLE STATE MA of July 1, 200 (the "Assigno") between Assignoted and any addit received by one operations of the amount of the company of the Debtor; processing the designated at | POSTAL CODE 02116 6 (the "Loan Ag r") and assigned signor and Secur nal Building Cor cional Bonds issu r on behalf of the f the Project (as in the form of ac ts, whether now provided, howev the time of mak | SUFFIX COUNTR USA greement") by I to Secured red Party, reporation's ued pursuant e Debtor defined in the counts, existing or er, that gifts, ing thereof b |
| 3. S OR 3c. 22 4. 1 All and Particle Heritage He | ECURED PARTY'S 3a. ORGANIZATION'S N The Bank of Ne 3b. INDIVIDUAL'S LAST MAILING ADDRESS 2 Berkeley Street, 2 his FINANCING STATEM Gross Receipts t between the Del ty pursuant to the uring the loan of ucational Facility Indenture. Gros luding, but witho an Agreement) ar ounts receivable, eafter coming int nts, bequests, dor donor or maker | ORGANIZATION DEBTOR S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNATION AME) W York Trust Company, N.A., as Townson and Floor ENT covers the following collateral: of the Secured Party subject to that control and Rhode Island Health and Edut certain Indenture of Trust dated as \$2,000,000 of the proceeds of the \$1 Revenue Bonds Catholic School Post Receipts includes all receipts, revenut limiting the generality of the foreign and from all other projects of the Debtom payment intangibles, contract rights to existence and whether now owned that the process of the process of the Debtom and contributions, whether has being for certain specific purposes. | PR S/P) - insert only one secured party name (3c) rustee FIRST NAME CITY Boston Program Issue, Series 2006A nues, income and other moneys going, revenues derived from the for and all rights to receive the second or held or hereafter acquired by eretofore or hereafter made and se, and the income derived therefore. | a or 3b) MIDDLE STATE MA of July 1, 200 (the "Assigno") between Assignoted and any addit received by one operations of the amount of the company of the Debtor; processing the designated at | POSTAL CODE 02116 6 (the "Loan Ag r") and assigned signor and Secur nal Building Cor cional Bonds issu r on behalf of the f the Project (as in the form of ac ts, whether now provided, howev the time of mak | SUFFIX COUNTRY USA greement") by I to Secured red Party, reporation's ued pursuant e Debtor defined in the ecounts, existing or rer, that gifts, ing thereof b |
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| NAME OF FIRST DERTOR (4a or | 1b) ON RELATED FINANCING STA | TEMENT | | | |
|--|-------------------------------------|--|----------------------------------|---------------------------|-----------------|
| 9a. ORGANIZATION'S NAME | TO ON NELLANDED I MANIORITO DANS | | | | |
| Ocean Tides Inc. | | | | | |
| 9b, INDIVIDUAL'S LAST NAME | FIRST NAME | MIDDLE NAME, SUFFIX | | | |
| 0. MISCELLANEOUS: | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| 11 ADDITIONAL DEBTOR'S EXAC | T FULL LEGAL NAME - insert only one | THE Al | | IS FOR FILING OFFIC | E USE ONLY |
| 11a. ORGANIZATION'S NAME | | | | | |
| 11b. INDIVIDUAL'S LAST NAME | D. INDIVIDUAL'S LAST NAME | | MIDDLE NAME | | SUFFIX |
| 11c. MAILING ADDRESS | | СПҮ | STATE | POSTAL CODE | COUNTRY |
| 1. TAX ID #: SSN OR EIN ADD'L INFO RE 11e. TYPE OF ORGANIZATION ORGANIZATION | | 11f. JURISDICTION OF ORGANIZATION | 11g. ORGANIZATIONAL ID #, if any | | |
| DEBTOR 12. ADDITIONAL SECURED PA | ARTY'S or X ASSIGNOR S/P'S | NAME - insert only one name (12a or 12b) | | | |
| | ucational Building Corporation | | , | A | |
| 12b. INDIVIDUAL'S LAST NAME | | FIRST NAME | MIDDLE | | SUFFIX |
| 12c. MAILING ADDRESS 170 Westminster Street, Suite 12 | 200 | Providence | STATE | POSTAL CODE 02903 | COUNTRY |
| 13. This FINANCING STATEMENT covers | timber to be cut or as-extracted | 16. Additional collateral description: | <u> </u> | | |
| collateral, or is filed as a fixture filed. Description of real estate: | iling. | | | | |
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| | | | | | |
| 15. Name and address of a RECORD OV (if Debtor does not have a record inter | | | | | |
| V | | | | | |
| | | 17. Check only if applicable and check only Debtor is a Trust or Trustee actin | g with respect to | property held in trust or | Decedent's Esta |
| | | 18. Check only if applicable and check only Debtor is a TRANSMITTING UTILITY | one box. | | |
| | | : harried | | | |
| | | Filed in connection with a Manufacture X Filed in connection with a Public-Finance | | | |