

UCC-3 Form - Continuation

Original File Number: **201008377970** Original File Date: **2/26/2010 11:13:00 AM**

FILER INFORMATION

Full name: **RACHEL MAYNARD** Phone: **978-870-1435**

CONTACT INFORMATION

Contact name: **FIDELITY CO-OPERATIVE BANK**

Street #1: **675 MAIN STREET**

City: **FITCHBURG** State: **MA** ZIP: **01420** Country: **USA**

Notification Method: **E-MAIL** Email: **RMAYNARD@FIDELITYBANKONLINE.COM**

DEBTOR INFORMATION

Org. Name: **RENT-ALL OF NEWPORT, INC.**

Mailing Address1: **1139 AQUIDNECK AVENUE**

City: **MIDDLETON** State: **RI** ZIP: **02842** Country: **USA**

SECURED PARTY INFORMATION

Org. Name: **FIDELITY CO-OPERATIVE BANK**

Mailing Address1: **675 MAIN STREET, PO BOX 438**

City: **FITCHBURG** State: **MA** ZIP: **01420** Country: **USA**

TRANSACTION TYPE: STANDARD

COLLATERAL IS / ADMINISTERED BY:

ALTERNATIVE DESIGNATION: