

# UCC-1 Form

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## FILER INFORMATION

Full name: DANIELLE ANTONETTI      Phone: 401-453-2300

## CONTACT INFORMATION

Contact name: LISA M. KRESGE

Street #1: BRENNAN, RECUPERO, CASCIONE, SCUNGIO, & MCALLISTER, LLP

Street #2: 362 BROADWAY

City: PROVIDENCE      State: RI      ZIP: 02909      Country: USA

Notification Method: E-MAIL      Email: DANTONETTI@BRCSM.COM

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## DEBTOR INFORMATION

Org. Name: ROCHS FRESH FOODS, LLC

Mailing Address1: 1183 BOSTON NECK ROAD

City: NARRAGANSETT      State: RI      ZIP: 02882      Country: USA

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## SECURED PARTY INFORMATION

Org. Name: CENTREVILLE SAVINGS BANK

Mailing Address1: 1480 MAIN STREET

Mailing Address2: ATTN: SCOTT M. SHEPPARD

City: WEST WARWICK      State: RI      ZIP: 02893      Country: USA

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TRANSACTION TYPE: STANDARD  
COLLATERAL IS / ADMINISTERED BY:  
ALTERNATIVE DESIGNATION:

**COLLATERAL**

All of Debtor’s personal property and fixtures, now owned and hereafter acquired by Debtor or in which Debtor has or may hereafter acquire an interest, whether now existing or hereafter arising, including the following, and all proceeds and products thereof: inventory, equipment, fixtures, accounts, general intangibles, chattel paper, instruments, documents, deposit accounts, letter-of-credit rights, investment property, and all books and records relating to any of the foregoing.