UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-800-858-5294 B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscinfo.com C. SEND ACKNOWLEDGMENT TO: (Name and Address)	
A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-800-858-5294 B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscinfo.com	
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SPRFiling@cscinfo.com	
1223 02803	
Corporation Service Company 801 Adlai Stevenson Drive	
Springfield, IL 62703 Filed In: Rhode Island	
(S.O.S.) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY	
1a. INITIAL FINANCING STATEMENT FILE NUMBER 1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record]	
007429 03/07/2002	
2. TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termina Statement	tion
ASStGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9 For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8	
4. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement continued for the additional period provided by applicable law	nent is
5. PARTY INFORMATION CHANGE:	
Check one of these two boxes: AND Check one of these three boxes to: CHANGE name and/or address: CompleteADD name: Complete itemDELETE name: Give reco	ord name
This Change affects Debtor or Secured Party of record item 6a or 6b; and item 7c 7a and item 7c 7a or 7b, and item 7c 7a or 7b, and item 7c 6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b)	6b
6a. ORGANIZATION'S NAMEEGP, INC.	
OR 66. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFI	x
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact. full name; do not omit, modify, or abbreviate any part of the Debtor 7a. ORGANIZATION'S NAME	s name)
OR 75. INDIVIDUAL'S SÜRNAME	
TO HADIVIDUAL'S SUNIVAME	
INDIVIDUAL'S FIRST PERSONAL NAME	
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	
7c. MAILING ADDRESS CITY STATE POSTAL CODE COUN	
8. COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN or	
Indicate collateral:	and to a
9 NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)	
If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor [9a. ORGANIZATION'S NAME Citizens Bank, N.A. formerly known as RBS Citizens, N.A.	
DR CHAINMENTALIS SUBMANS	
96. INDIVIDUAL'S SURNAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX	(_
10. OPTIONAL FILER REFERENCE DATA: Debtor: EGP, INC.	—— 02803