

UCC-1 Form

FILER INFORMATION

Full name: **STEVEN P. DeLUCA,ESQ.**

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SEND ACKNOWLEDGEMENT TO

Contact name: **WIECK DeLUCA GEMMA INCORPORATED**

Mailing Address: **56 PINE STREET FLOOR 7**

City, State Zip Country: **PROVIDENCE, RI 02903 USA**

DEBTOR INFORMATION

Org. Name: **LYMAN LOFTS DEVELOPERS LLC**

Mailing Address: **101 CORLISS STREET**

City, State Zip Country: **PROVIDENCE, RI 02904 USA**

SECURED PARTY INFORMATION

Org. Name: **BANK RHODE ISLAND**

Mailing Address: **ONE TURKS HEAD PLACE**

City, State Zip Country: **PROVIDENCE, RI 02903 USA**

TRANSACTION TYPE: STANDARD

COLLATERAL

ALL ASSETS OWNED BY DEBTOR AND LOCATED AT OR USED OR USEABLE IN CONNECTION WITH THE REAL PROPERTY AND IMPROVEMENTS LOCATED AT 184 WOONASQUATUCKET AVENUE, NORTH PROVIDENCE, RHODE ISLAND.