

UCC-1 Form

FILER INFORMATION

Full name: **COLLEEN MURPHY**

Email Contact at Filer: **CMURPHY@BAYCOLONY.ORG**

SEND ACKNOWLEDGEMENT TO

Contact name: **BAY COLONY DEVELOPMENT CORP.**

Mailing Address: **230 THIRD AVENUE, 1ST FLOOR**

City, State Zip Country: **WALTHAM, MA 02451 USA**

DEBTOR INFORMATION

Org. Name: **MBJ REALTY LLC**

Mailing Address: **519 MENDON ROAD**

City, State Zip Country: **CUMBERLAND, RI 02864 USA**

Org. Name: **IDS HIGHWAY SAFETY, INC.**

Mailing Address: **1230 MENDON ROAD**

City, State Zip Country: **CUMBERLAND, RI 02864 USA**

SECURED PARTY INFORMATION

Org. Name: **BAY COLONY DEVELOPMENT CORP.**

Mailing Address: **230 THIRD AVENUE, 1ST FLOOR**

City, State Zip Country: **WALTHAM, MA 02451 USA**

ASSIGNEE INFORMATION

Org. Name: **U.S. SMALL BUSINESS ADMINISTRATION**

Mailing Address: **c/o BAY COLONY DEVELOPMENT CORP., 230 THIRD AVENUE, 1ST FLOOR**

City, State Zip Country: **WALTHAM, MA 02451 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: 388 934 7010

COLLATERAL

THE FOLLOWING PERSONAL PROPERTY (INCLUDING ANY PROCEEDS AND PRODUCTS), ACQUIRED WITH LOAN OR PROJECT PROCEEDS, INCLUDING ALL REPLACEMENTS AND SUBSTITUTIONS, WHEREVER LOCATED: EQUIPMENT; FIXTURES; FURNITURE