

UCC-1 Form

FILER INFORMATION

Full name: **CAROLINE NORATO**

Email Contact at Filer: **CNORATO@PEOPLESUCU.COM**

SEND ACKNOWLEDGEMENT TO

Contact name: **PEOPLE'S CREDIT UNION**

Mailing Address: **858 WEST MAIN ROAD**

City, State Zip Country: **MIDDLETOWN, RI 02842 USA**

DEBTOR INFORMATION

Org. Name: **ISLAND CHILD CARE CENTER, INC.**

Mailing Address: **3044 EAST MAIN ROAD**

City, State Zip Country: **PORTSMOUTH, RI 02871 USA**

SECURED PARTY INFORMATION

Org. Name: **PEOPLE'S CREDIT UNION**

Mailing Address: **858 WEST MAIN ROAD**

City, State Zip Country: **MIDDLETOWN, RI 02842 USA**

TRANSACTION TYPE: STANDARD

COLLATERAL

ALL INVENTORY, CHATTEL PAPER, ACCOUNTS, EQUIPMENT, GENERAL INTANGIBLES AND FIXTURES; WHETHER ANY OF THE FOREGOING IS OWNED NOW OR ACQUIRED LATER; ALL ACCESSIONS, ADDITIONS, REPLACEMENTS, AND SUBSTITUTIONS RELATING TO ANY OF THE FOREGOING; ALL RECORDS OF ANY KIND RELATING TO ANY OF THE FOREGOING.