

# UCC-1 Form

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## FILER INFORMATION

*Full name:*

*Email Contact at Filer:* MALBANESO@P1FINANCE.COM

## SEND ACKNOWLEDGEMENT TO

*Contact name:* P1 FINANCE

*Mailing Address:* 280 TECHNOLOGY PARKWAY SUITE 100

*City, State Zip Country:* NORCROSS, GA 30092 USA

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## DEBTOR INFORMATION

*Org. Name:* COASTAL HOUSING CORPORATION

*Mailing Address:* 2368 E MAIN ROAD

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

*Last Name (i.e. Family Name or Surname):* SERINA *First Name:* ALLISON

*Mailing Address:* 34 DOROTHY AVENUE

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

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## SECURED PARTY INFORMATION

*Org. Name:* P1 FINANCE

*Mailing Address:* 280 TECHNOLOGY PARKWAY, SUITE 100

*City, State Zip Country:* NORCROSS, GA 30092 USA

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**TRANSACTION TYPE:** STANDARD

**ALTERNATIVE DESIGNATION:** CREDITOR

**CUSTOMER REFERENCE:** #1830-210112-25160 (COASTAL HOUSING CORPORATION)

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## COLLATERAL

ALL ASSETS OF DEBTOR NOW OWNED OR HEREAFTER ACQUIRED BY THE DEBTOR