

UCC-1 Form

FILER INFORMATION

Full name: **FRANK A. LOMBARDI**

Email Contact at Filer: **RENEE@LLGRI.COM**

SEND ACKNOWLEDGEMENT TO

Contact name: **PINE GLEN CONDOMINIUM ASSOCIATION**

Mailing Address: **PO Box 6758**

City, State Zip Country: **WARWICK, RI 02887 USA**

DEBTOR INFORMATION

Org. Name: **PINE GLEN CONDOMINIUM ASSOCIATION**

Mailing Address: **PO Box 6758**

City, State Zip Country: **WARWICK, RI 02887 USA**

SECURED PARTY INFORMATION

Org. Name: **WINDSOR FEDERAL SAVINGS AND LOAN, ITS SUCCESSORS AND/OR ASSIGNS ATIMA**

Mailing Address: **250 BROAD ST**

City, State Zip Country: **WINDSOR, CT 06095 USA**

TRANSACTION TYPE: STANDARD

COLLATERAL

SEE FINANCING STATEMENT ATTACHED HERETO