

# UCC-1 Form

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## FILER INFORMATION

*Full name:* **SEAN COLE**

*Email Contact at Filer:* **SCOLE@CENTREVILLEBANK.COM**

## SEND ACKNOWLEDGEMENT TO

*Contact name:* **CENTREVILLE BANK**

*Mailing Address:* **1218 MAIN ST**

*City, State Zip Country:* **WEST WARWICK, RI 02893 USA**

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## DEBTOR INFORMATION

*Org. Name:* **BIKE-ON.COM, INC**

*Mailing Address:* **72 COLLEGE ST**

*City, State Zip Country:* **WARWICK, RI 02886 USA**

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## SECURED PARTY INFORMATION

*Org. Name:* **CENTREVILLE BANK**

*Mailing Address:* **1218 MAIN ST**

*City, State Zip Country:* **WEST WARWICK, RI 02893 USA**

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## TRANSACTION TYPE: STANDARD

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## COLLATERAL

ALL OF DEBTOR'S PERSONAL PROPERTY AND FIXTURES, NOW OWNED AND HEREAFTER ACQUIRED BY DEBTOR OR IN WHICH DEBTOR HAS OR MAY HEREAFTER ACQUIRE AN INTEREST, WHETHER NOW EXISTING OR HEREAFTER ARISING, INCLUDING THE FOLLOWING, AND ALL PROCEEDS AND PRODUCTS THEREOF: INVENTORY, EQUIPMENT, FIXTURES, ACCOUNTS, GENERAL INTANGIBLES, CHATTEL PAPER, INSTRUMENTS, DOCUMENTS, DEPOSIT ACCOUNTS, LETTER-OF-CREDIT RIGHTS, INVESTMENT PROPERTY, AND ALL BOOKS AND RECORDS RELATING TO ANY OF THE FOREGOING.