

UCC-1 Form

FILER INFORMATION

Full name: **MICHELLE MACKNIGHT**

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SEND ACKNOWLEDGEMENT TO

Contact name: **ROBERTS CARROLL FELDSTEIN & PEIRCE**

Mailing Address: **10 WEYBOSSET ST., SUITE 800**

City, State Zip Country: **PROVIDENCE, RI 02903 USA**

DEBTOR INFORMATION

Org. Name: **IMPERIAL POINT CONDOMINIUM ASSOCIATION**

Mailing Address: **14 IMPERIAL PLACE**

City, State Zip Country: **PROVIDENCE, RI 02903 USA**

SECURED PARTY INFORMATION

Org. Name: **WEBSTER BANK, N.A.**

Mailing Address: **50 KENNEDY PLAZA**

City, State Zip Country: **PROVIDENCE, RI 02903 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: OUR FILE NO. 2629-208

COLLATERAL

SEE EXHIBIT A ATTACHED HERETO AND MADE A PART HEREOF

EXHIBIT A

All common charges, limited common expenses and assessments now or hereafter levied and assessed against or collected from the owners of the units of Imperial Point Condominium Association, located at 14 Imperial Place, Providence, Rhode Island and the debtors right and authority to adopt and implement budgets, to levy common charges, fees, assessments and to enforce payment and to collect the same; all liens, guarantees, securities, rights, remedies and privileges statutory, by covenant or otherwise, and more particularly those which permit debtor to effect the collection of unpaid common charges, fees, and assessments pursuant to the provisions of the Condominium Declaration and the Rhode Island General Laws Chapter 34-36 et. seq. and Chapter 34-36.1 et. seq. as applicable; all other income, rents and profits and interest thereon received by or on behalf of Debtor from all sources whatsoever, subject, however, to the rights of mortgages of units all pursuant to that certain Collateral Assignment of Condominium Fees and Assessments dated even date herewith.

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