UCC-1 Form

FILER INFORMATION

Full name: **WOLTERS KLUWER LIEN SOLUTIONS**

Email Contact at Filer: **CTLSWEBACK@WOLTERSKLUWER.COM**

SEND ACKNOWLEDGEMENT TO

Contact name: **LIEN SOLUTIONS**

Mailing Address: **P.O. BOX 29071**

City, State Zip Country: **GLENDALE, CA 91209-9071 USA**

DEBTOR INFORMATION

Org. Name: **NEW ENGLAND GOLF COURSE MANAGEMENT INC.**

Mailing Address: **245 CONANICUS AVE**

City, State Zip Country: **JAMESTOWN, RI 02835 USA**

SECURED PARTY INFORMATION

Org. Name: **KUBOTA CREDIT CORPORATION, U.S.A.**

Mailing Address: **PO BOX 2046**

City, State Zip Country: **GRAPEVINE, TX 76099 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: RI-0-99218712-69359810

COLLATERAL

KUBOTA L5060GST KBUL5DGRCP8H40423 *4WD GST TRACTOR WFOLDABLE RO;KUBOTA LA1055 C6241 FRONT LDR L4760L5060L5460L;