

UCC-1 Form

FILER INFORMATION

Full name: **CORPSMART**

Email Contact at Filer: **FILINGS@CORP-SMART.COM**

SEND ACKNOWLEDGEMENT TO

Contact name: **CORPSMART**

Mailing Address: **106 5TH AVE SE**

City, State Zip Country: **OLYMPIA, WA 98501 USA**

DEBTOR INFORMATION

Org. Name: **NEWPORT COUNTRY CLUB**

Mailing Address: **39 BELLEVUE AVENUE, 2ND FLOOR**

City, State Zip Country: **NEWPORT, RI 02840 USA**

SECURED PARTY INFORMATION

Org. Name: **FIRST BUSINESS SPECIALTY FINANCE, LLC**

Mailing Address: **401 CHARMANY DR**

City, State Zip Country: **MADISON, WI 53719 USA**

TRANSACTION TYPE: STANDARD

COLLATERAL

(1) SANY SLB95 BACKHOE CAB S/N: SY007QCD00598 WITH BACKHOE CAB, 24' QUICK HITCH HD BUCKET, QC HOE COUPLER, GEN PURPOSE BUCKET, HYD COUPLER, LOADER QC CONTROL KIT AND ALL ATTACHMENTS AND REPLACEMENT PARTS TOGETHER WITH ALL THE PROPERTY DEBTOR OWNS OR ACQUIRES, INCLUDING ANY GOODS, CHATTEL PAPER, EQUIPMENT, ACCOUNTS, DEPOSIT ACCOUNTS, INSTRUMENTS, CONTRACT RIGHTS AND GENERAL INTANGIBLES, WHEREVER LOCATED, TOGETHER WITH ALL ATTACHMENTS, ACCESSORIES, UPGRADES, REPLACEMENT PARTS, AND PROCEEDS, INCLUDING INSURANCE PROCEEDS.