

2012 Feb 24 1:59 PM



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No. 5451 P. 2

3/5

Lien#: 370301-4

EFS

**EFS-3**

STATE OF OREGON
 Corporation Division - UCO
 255 Capitol Street NE, Suite 181
 Salem, OR 97310-1827
 (503) 986-2200 Facsimile (503) 378-1186
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Statement Of Termination, Continuation, Assignment, Amendment

PLEASE TYPE OR PRINT LEGIBLY. READ INSTRUCTIONS BEFORE FILLING OUT FORM.

A. THIS STATEMENT REFERS TO ORIGINAL FINANCING STATEMENT NUMBER: 370301-3**DATE FILED: 4/2/2007**

→ This filing supersedes all previous information associated with this filing number. Please complete this form with all the current information.

B. TYPE OF AMENDMENT (CHECK ALL BOXES THAT APPLY)
☐ **LAPSE/TERMINATION (NO FEE).** The Secured Party certifies that they no longer claim interest under the financing statement bearing the file number shown in SECTION A.

☒ **CONTINUATION.** Submitted within six months prior to expiration date.

☐ **ASSIGNMENT.** The Secured Party assigns to the Assignee whose name and address is shown in SECTION F and bearing the file number shown in SECTION A.
C. NAME(S) OF PERSON(S) SUBJECTING FARM PRODUCTS TO THE SECURITY INTEREST1. Smith, Jerry C.2. Smith, Linda C.

3. _____

Mark One:

If individual, list last name first.

☐ - Business ☒ - Individual

☐ - Business ☒ - Individual

☐ - Business ☐ - Individual
D. MAILING ADDRESS1. 55550 Crosby Road2. Myrtle Point, OR 97458

3. _____

E. SECURED PARTY NAME(S) AND ADDRESS(ES)1. Northwest Farm Credit Services, PCA2. 2222 NW Kline Street3. Roseburg, Oregon 97471**F. ASSIGNEE NAME AND ADDRESS (If Any)**

1. _____

2. _____

3. _____

G. FARM PRODUCT CODE**COUNTY CODE****CROP YEAR (if applicable)****AMOUNT (if applicable)**100106------------**Debtor**

The requirement that a document be signed, authorized or otherwise authenticated by the debtor is satisfied if the debtor has executed a security agreement against a security interest in the farm products to the secured party ORS Ch. 89.116 (7)

RETURN TO (Please type within the box)

NORTHWEST FARM CREDIT SERVICES**2222 N.W. KLINE STREET****ROSEBURG, OR 97471****Secured Party****FEES**

Make check for \$16.00 payable to "Corporation Division."

No fee for Termination

Notel Filing fees may be paid with Visa or MasterCard. The card number and expiration date should be submitted on a separate sheet of paper for your protection.

DO NOT SUBMIT DUPLICATES OF THIS FILING OR ITS ATTACHMENTS.

421 (01/12)

 Received Time Feb. 24. 2012 10:30AM No. 5429
 Received Time Feb. 24. 2012 2:22PM No. 5455

Credit Card 2-24-12 \$15-