

Exhibit “E”

STATE OF CALIFORNIA UCC filing

Doc# : 2013124058
Page 1 of 2
Date: 11/01/2013 9:51AM
Filed & Recorded in
Official Records of
WASH DC RECORDER OF DEEDS
IDA WILLIAMS
RECORDER OF DEEDS
Doc Type: EFINANCING

PROCESSING	\$	5.00
E-RECORD	\$	25.00
ESURCHARGE	\$	6.50

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional] John Skelley 760 798 1805
B. SEND ACKNOWLEDGMENT TO: (Name and Address) Skelley, John San Marcos, CA 92078

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME STATE OF CALIFORNIA						
OR	1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
1c. MAILING ADDRESS 1315 - 10th STREET			CITY SACRAMENTO	STATE CA	POSTAL CODE 95814	COUNTRY UNITED STATES
1d. TAX ID #: SSN OR EIN UNKNOWN	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION CORPORATION	1f. JURISDICTION OF ORGANIZATION DISTRICT OF COLUMB	1g. ORGANIZATIONAL ID #, if any D.C.		<input type="checkbox"/> NONE

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME						
OR	2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
2c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY
2d. TAX ID #: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any		<input type="checkbox"/> NONE

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME						
OR	3b. INDIVIDUAL'S LAST NAME SKELLEY -- A LIVING MAN		FIRST NAME JOHN	MIDDLE NAME PATRICK	SUFFIX	
3c. MAILING ADDRESS 1215 Highbluff Avenue			CITY San Marcos	STATE C	POSTAL CODE 92078	COUNTRY UNITED STATES

4. This FINANCING STATEMENT covers the following collateral:

This is an entry into the commercial registry and the following private PROPERTY is herein claimed, NUNC PRO TUNC, from 08/27/2004 at ONE HUNDRED PER CENT (100%) ownership of the Bailor. The Bailee is a Corporation. The value of the PROPERTY is Ninety Nine Million dollars USD (\$99,000,000.00).

The penalty for use without equal consideration, upon Notice, will be assessed per instance, per person (including any duly appointed Attorney-in-Fact) up to the full value stated above. Any person gaining said PROPERTY via coercion, misrepresentation, lack of full disclosure, threat, duress, or undue pressure, waives any immunity and is subject to a penalty in the amount of the full value of the PROPERTY. The PROPERTY IS: John and Annette Skelley accepted the GRANT DEED and it Recordation and became the Holder and Holders-in-due-course of Same. John and Annette Skelley assert

5. ALTERNATIVE DESIGNATION [if applicable]:	LESSEE/LESSOR	CONSIGNEE/CONSIGNOR	<input checked="" type="checkbox"/> BAILEE/BAILOR	SELLER/BUYER	AG. LIEN	NON-UCC FILING
6. This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum	(if applicable)		7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (optional)	All Debtors	Debtor 1	Debtor 2
8. OPTIONAL FILER REFERENCE DATA There is a UCCad with this filing COPY CLAIM RESERVED						

RECORDER OF DEEDS

Doc Type: EFINANCING

PROCESSING	\$	5.00
E-RECORD	\$	25.00
ESURCHARGE	\$	6.50

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT

9a. ORGANIZATION'S NAME STATE OF CALIFORNIA		
OR	9b. INDIVIDUAL'S LAST NAME	FIRST NAME MIDDLE NAME, SUFFIX

10. MISCELLANEOUS:

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (11a or 11b) - do not abbreviate or combine names

11a. ORGANIZATION'S NAME WESTRIDGE AT SAN ELIJO HILLS			
OR	11b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME SUFFIX
11c. MAILING ADDRESS P.O. BOX 514909		CITY LOS ANGELOS	STATE c
		POSTAL CODE 90051-4909	COUNTRY UNITED STATES
11d. TAX ID #: SSN OR EIN UNKNOWN	ADD'L INFO RE ORGANIZATION DEBTOR	11e. TYPE OF ORGANIZATION ASSOCIATION	11f. JURISDICTION OF ORGANIZATION CALIFORNIA
11g. ORGANIZATIONAL ID #: if any UNKNOWN			<input type="checkbox"/> NONE

12. ☒ ADDITIONAL SECURED PARTY'S or ☐ ASSIGNOR S/P'S NAME - insert only one name (12a or 12b)

12a. ORGANIZATION'S NAME			
OR	12b. INDIVIDUAL'S LAST NAME SKELLEY--A LIVING WOMAN	FIRST NAME ANNETTE	MIDDLE NAME GAY
12c. MAILING ADDRESS 1215 Highbluff Avenue		CITY SAN MARCOS	STATE 92078
		POSTAL CODE 92078	COUNTRY UNITED STATES

13. This FINANCING STATEMENT covers ☐ timber to be cut or ☐ as-extracted collateral, or is filed as a ☒ fixture filing.

14. Description of real estate:
Private Property fully described in
the GRANT DEED, as Recorded in SAN
DIEGO COUNTY, CALIFORNIA, as
Document # 2004-0820383, on August
27, 2004, at 4:25 pm.

15. Name and address of a RECORD OWNER of above-described real estate
(if Debtor does not have a record interest):
SAN DIEGO COUNTY RECORDER

1600 PACIFIC HIGHWAY SUITE 260

SAN DIEGO, 92101

16. Additional collateral description:

manifest Title to the Private Property fully described in the GRANT DEED, as Recorded in SAN DIEGO COUNTY, CALIFORNIA, as Document # 2004-0820383, on August 27, 2004, at 4:25 p.m.
Acceptance by John and Annette Skelley is Acknowledgement by STATE OF CALIFORNIA that it, STATE OF CALIFORNIA, warrants against all comers and claimants the John and Annette Skelley hold clean, lawful Title to the described PROPERTY.

Without Recourse, All Rights Reserved,
/s/ John Patrick Skelley the living man
/s/ Annette Gay Skelley - the living woman

17. Check only if applicable and check only one box.

Debtor is a ☐ Trust or ☐ Trustee acting with respect to property held in trust or ☐ Decedent's Estate

18. Check only if applicable and check only one box.

☐ Debtor is a TRANSMITTING UTILITY
☐ Filed in connection with a Manufactured-Home Transaction -- effective 30 years
☒ Filed in connection with a Public-Finance Transaction -- effective 30 years

Payment Processing Details

Payment Processing Successful

Receipt Number: 101397391-WEB

Approval Code: 041859

Transaction Id: 3934531256220182586986

Transaction Details: 100: Successful transaction.

Done