The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n).	No. of Additional Sheets Presented:	This FINANCING STATEMENT is presented to a Filing Officer for filing pursuant to the Uniform Commercial Code.	
Return copy or recorded original to LANGE, SIMPSON, ROBINS	SON & SOMERVILLE	THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	
1700 FIRST ALABAMA BA BIRMINGHAM, AL 35203 ATTN: MR. RICHARD TISH	NK BUILDING	8	
	,		N
Pre-paid Acct. # 2. Name and Address of Debtor	(Last Name First if a Person)		26
Jeffcoat, Sue P. Rt. 1 Box 81	· .		Mile A
Harpersville, Al	. 35078		
Social Security/Tax ID #	(IF ANY) (Last Name First if a Person)		
Social Security/Tax ID #	<u></u>		
Additional debtors on attached UCC-E	<u></u>	4 ASSIGNEE OF SECURED PARTY (IF ANY)	1)
RESOLUTION TRUST CORPORATION, RECEIVER FOR CITY FEDERAL SAVINGS AND LOAN ASSOCIATION 2030 SECOND AVENUE, NORTH BIRMINGHAM, AL 35203		4. ASSIGNEE OF SECURED PARTY Federal Bank For Savings C/O ROSE DISCOUNT MOBILE HOMES, INC. ATTN: MR. TOMMY ROSE ROUTE 1, BOX 185-B HICKORY, MS 39332	
Social Security/Tax ID #	} 		
☐ Additional secured parties on attached UC	C-E		
5. K This statement refers to original Finan		16862	
Filed with Shelby Co	statement between the foregoing Debtor and Secured	Party, bearing file number shown above, is still effective.	
7. Termination. Secured Party no longer 8 Partial or The Secured Party's right	or claims a security interest under the financing statement under the financing statement bearing file number tem 11 or to all of the property listed on this file, is assistant appears in item 4. Statement file number shown above is amended as set for the collateral described in item 11 from the financing	shown above to the great to the assignee	
11.	8.00	11A. Enter Code(a) From Back of Form That Best Describes The Collateral Covered By This Filing:	
			- —
			- -
Check X if covered: Products of Coils	ateral are also covered.	RESOLUTION TRUST CORPORATION, RECEIVER FOR	
Signature(s) of Debtor(s)		CITY FEDERAL SANINGS AND LOAN ASSOCIATION	
Signature(s) of Debtor(s) (necessary o	nly if item 9 is applicable)	BY: IT'S ATTORNEY - IN - FACT	
<u> </u>		Type Name of Individual or Business	
Type Name of Individual or Business (1) FILING OFFICER COPY — ALPHABETICAL (2) FILING OFFICER COPY — NUMERICAL	(3) FILING OFFICER COPY — ACKNOWLEDGEMENT (4) FILE COPY — SECOND PARTY(S)	(5) FILE COPY DEBTOR(S) STANDARD FORM — UNIFORM COMMERCIAL CODE — FORM Approved by The Secretary of State of Alabama	UCC-
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