

Rose Discount Mobile Homes
Rt. 1 Box 185B
Hickory, MS 39332

Pre-paid Acct. # _____

2 Name and Address of Debtor (Last Name First if a Person)

JERRY GRAY
PO BOX 524
PELHAM, AL 35124

Social Security/Tax ID # _____

2A Name and Address of Debtor (IF ANY) (Last Name First if a Person)

Social Security/Tax ID # _____

☐ Additional debtors on attached UCC-E

3 NAME AND ADDRESS OF SECURED PARTY (Last Name First if a Person)

Rose Discount Mobile Homes, Inc.
Rt. 1 Box 185B
Hickory, MS 39332

Social Security/Tax ID # _____

☐ Additional secured parties on attached UCC-E

5 The Financing Statement Covers the Following Types (or items) of Property:

One Used 1986 16X75 EAGLE Sr# 4589
and All General Intangibles.

Account# 39-35-154074

Check X if covered: ☐ Products of Collateral are also covered.

6 This statement is filed without the debtor's signature to perfect a security interest in collateral (check X, if so)

- ☐ already subject to a security interest in another jurisdiction when it was brought into this state.
☐ already subject to a security interest in another jurisdiction when debtor's location changed to this state.
☐ which is proceeds of the original collateral described above in which a security interest is perfected
☐ acquired after a change of name, identity or corporate structure of debtor
☒ to which the filing has lapsed.

7 Complete only when filing with the Judge of Probate.

The initial indebtedness secured by this financing statement is \$ **\$21,200.00**
Mortgage tax due (15¢ per \$100.00 or fraction thereof) \$ **\$31.80 + 13.00 = 44.80**

8 ☐ This financing statement covers timber to be cut, crops, or fixtures and is to be cross indexed in the real estate mortgage records (Describe real estate and if debtor does not have an interest of record, give name of record owner in Box 5)

Signature(s) of Secured Party(ies)
(Required only if filed without debtor's Signature — see Box 6)

Carolina Fox, V.P.
Signature(s) of Secured Party(ies) or Assignee

Rose Discount Mobile Homes, Inc.
Type Name of Individual or Business

Signature(s) of Debtor(s)

Signature(s) of Debtor(s)

Type Name of Individual or Business

(1) FILING OFFICER COPY - ALPHABETICAL
(2) FILING OFFICER COPY - NUMERICAL

(3) FILING OFFICER COPY-ACKNOWLEDGEMENT
(4) FILE COPY - SECURED

(5) FILE COPY DEBTOR(S)

STANDARD FORM — UNIFORM COMMERCIAL CODE — FORM UCC-1
Approved by The Secretary of State of Alabama

THIS SPACE FOR USE OF FILING OFFICER
Date, Time, Number & Filing Office

92 FEB 29 AM 7:52
JUDGE OF PROBATE
STATE OF ALA. SHELBY CO.
I CERTIFY THIS
INUMENT WAS FILED

030644

FILED WITH:

4 ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)

Magnolia Federal Bank for Savings
P.O. Box 1858
Hattiesburg, MS 39401

5A Enter Code(s) From
Back of Form That
Best Describes The
Collateral Covered
By This Filing:

6 0 2