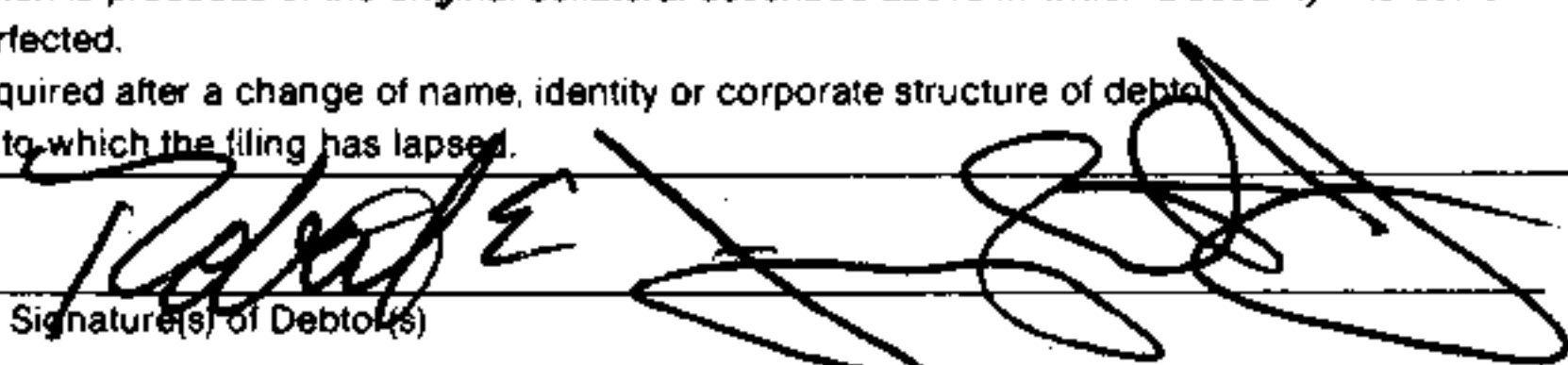
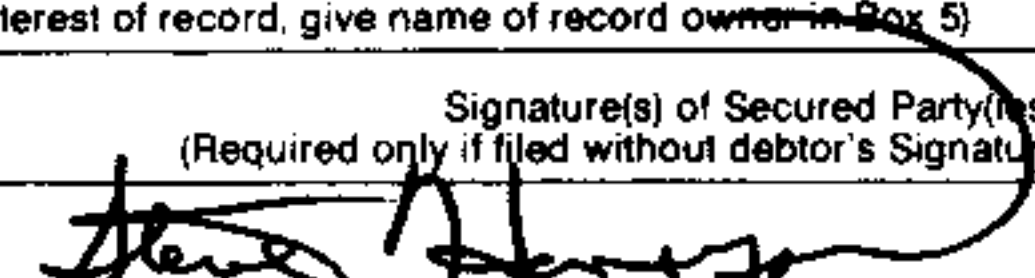


STATE OF ALABAMA — UNIFORM COMMERCIAL CODE — FINANCING STATEMENT  
FORM UCC-1 ALA.

Important: Read Instructions on Back Before Filling out Form.

|   |  |                                     |  |   |  |
|---|--|-------------------------------------|--|---|--|
| <input type="checkbox"/> 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.   |  |
| 1. Return copy or recorded original to:<br><br><div style="text-align: center;">FIRST ALABAMA BANK<br/>P O BOX 10205<br/>BIRMINGHAM, AL 352020000</div>   |  |                                     |  | <p>THIS SPACE FOR USE OF FILING OFFICER<br/>Date, Time, Number &amp; Filing Office</p> <div style="transform: rotate(-90deg); transform-origin: center;">Inst # 1995-08926</div> <div style="transform: rotate(-45deg); transform-origin: center;">04/06/1995-08926<br/>02:07 PM CERTIFIED<br/>SHELBY COUNTY JUDGE OF PROBATE<br/>25.65<br/>001 NCD</div> |  |
| 2. Name and Address of Debtor (Last Name First if a Person)<br><br><div style="text-align: center;">ROBERT E JINRIGHT, JR.<br/>120 PEBBLE DRIVE<br/>ALABASTER, AL 35007</div>   |  |                                     |  |   |  |
| Pre-paid Acct. # _____  |  |                                     |  |   |  |
| Social Security/Tax ID # _____  |  |                                     |  |   |  |
| 2A. Name and Address of Debtor (IF ANY) (Last Name First if a Person)   |  |                                     |  |   |  |
| Social Security/Tax ID # _____  |  |                                     |  |   |  |
| <input type="checkbox"/> Additional debtors on attached UCC-E   |  |                                     |  |   |  |
| 3. SECURED PARTY (Last Name First if a Person)<br><br><div style="text-align: center;">FIRST ALABAMA BANK<br/>P O Box 10205<br/>Birmingham, AL. 35202</div>   |  |                                     |  |   |  |
| Social Security/Tax ID # _____  |  |                                     |  |   |  |
| <input type="checkbox"/> Additional secured parties on attached UCC-E   |  |                                     |  |   |  |
| 4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)   |  |                                     |  |   |  |
| 5. The Financing Statement Covers the Following Types (or items) of Property:<br><br><div style="text-align: center;">NEW YAMAHA RA1100T RAIDER 110 YAMA1014B595<br/>NEW GATOR SINGLE PWC1A 1PBPE0864S2005053</div>   |  |                                     |  |   |  |
| Check X if covered: <input checked="" type="checkbox"/> 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)<br><input type="checkbox"/> already subject to a security interest in another jurisdiction when it was brought into this state.<br><input type="checkbox"/> already subject to a security interest in another jurisdiction when debtor's location changed to this state.<br><input type="checkbox"/> which is proceeds of the original collateral described above in which a security interest is perfected.<br><input type="checkbox"/> acquired after a change of name, identity or corporate structure of debtor.<br><input type="checkbox"/> as to which the filing has lapsed. |  |                                     |  |   |  |
| 7. Complete only when filing with the Judge of Probate:<br>The initial indebtedness secured by this financing statement is \$ <u>7091.65</u><br>Mortgage tax due (15¢ per \$100.00 or fraction thereof) \$ <u>10.65</u><br><input type="checkbox"/> 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 Debtor(s)<br>   |  |                                     |  | Signature(s) of Secured Party(ies)<br>(Required only if filed without debtor's Signature — see Box 6)<br>  |  |
| Signature(s) of Debtor(s)   |  |                                     |  | Signature(s) of Secured Party(ies) or Assignee<br><b>First Alabama Bank</b>   |  |
| 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 UCC-1  
Approved by The Secretary of State of Alabama

LON-186—1/91