## STATE OF ALABAMA — UNIFORM COMMERCIAL CODE STATEMENTS OF CONTINUATION, PARTIAL RELEASE, ASSIGNMENT, ETC. — FORM UCC-3

Important: Read Instructions on Back Before Filling out Form.

REORDER FROM

Registré, Inc.
514 PIERCE ST.
P.O. BOX 218
ANOKA, MN. 55303
(612) 421-1713

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 Filin filing pursuant to the Uniform Commercial Code.	g Officer for
Return copy or recorded original to		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	
CENTRAL STATE BANK POST OFFICE BOX 180 CALERA, ALABAMA 35040  Pre-paid Acct. #	(Last Name First if a Person)	36-01953	96-01953 CERTIFIED JUNE G PROMIE
Social Security/Tax ID #	(Last Name First if a Person)		12:30 PM 12:30 PM SELBY COUNTY SELBY COUNTY
Social Security/Tax ID #		FILED WITH:	
Additional debtors on attached UCC-E		SHELBY COUNTY JUDGE OF PROBATE	
3. NAME AND ADDRESS OF SECURED PARTY) (La	ast Name First if a Person)	4. ASSIGNEE OF SECURED PARTY (IF ANY)	(Last Name First if a Person)
Social Security/Tax ID #  Additional secured parties on attached UCC-E		1.000.000	
This statement refers to original Financing Statement bearing File No.  SHELBY COUNTY PROBATE JUDGE		1992-20092  Date Filed SEPTEMBER 15 19 95	
<ul> <li>7XXX Termination. Secured Party no longer claims at the Secured Party's right under property described in item 11 or Assignment. whose name and address appears.</li> <li>9. Amendment Financing statement bearing file</li> </ul>	a security interest under the financing statemen the financing statement bearing file number sh to all of the property sted on this file, is assign	iown above to the leed to the assignee in item 11.	
1979 WEDGEWOOD MOBILE H	OME		11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing:
•			
7			
Check X if covered: Products of Collateral are a	also covered.	MM	
Signature(s) of Debtor(s)		Signaturets of Secured Partylies BANK	
Signature(s) of Debtor(s) (necessary only if item	9 is applicable)	Signature(s) of Secured Party(ies)	
Type Name of Individual or Business		Type Name of Individual or Business	M COMMERCIAL CODE — FORM LICC-3