This FINANCING STATEMENT is presented to a Filing Officer for No. of Additional filing pursuant to the Uniform Commercial Code. ☐ The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n). Sheets Presented: THIS SPACE FOR USE OF FILING OFFICER Return copy or recorded original to Date, Time, Number & Filing Office MAGNA MORTGAGE COMPANY P O BOX 18001 39404 HATTIESBURG, MS Pre-paid Acct. #_ (Last Name First if a Person) Name and Address of Debtor MASSENGILL, WILLIAM K. ROUTE 1 BOX 823 LEEDS, AL 35094 Social Security/Tax ID #. (Last Name First if a Person) (IF ANY) 2A. Name and Address of Debtor LATHAM, SHERYL D. SAME FILED WITH: Social Security/Tax ID #J Additional debtors on attached UCC-E (Last Name First if a Person) 4. ASSIGNEE OF SECURED PARTY (IF ANY) 3. NAME AND ADDRESS OF SECURED PARTY) (Last Name First if a Person) MAGNOLIA FEDERAL BANK FOR SAVINGS P O BOX 1858 HATTIESBURG, MS 39403 Social Security/Tax ID #__ ☐ Additional secured parties on attached UCC-E 019671 5. This statement refers to original Financing Statement bearing File No. ____ ₁₉ 93 2-16-SHELBY COUNTY Filed with 6. Continuation. The original financing statement between the foregoing Debtor and Secured Party, bearing file number shown above, is still effective. 7 Extermination. Secured Party no longer claims a security interest under the financing statement bearing the file number shown above. The Secured Party's right under the financing statement bearing file number shown above to the 8. Partial or property described in item 11 or to all of the property listed on this file, is assigned to the assignee ☐ Full whose name and address appears in item 4. Assignment. Financing statement bearing file number shown above is amended as set forth in item 11. 9. Amendment Secured Party releases the collateral described in item 11 from the financing statement bearing file 10. Partial number shown above. Release 11. 8739155154 11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing: UNION PLANTERS BANK, NATIONAL ASSOCIATION -SUCCESSOR BY MERGER WITH MAGNOLIA FEDERAL -Check X if covered: Products of Collateral are also covered. BANK FOR SAVINGS ATTORNEY_IN_FACT Signature(s) of Debtor(s) Signature(s) of Secured Party(ies) Signature(s) of Debtor(s) (necessary only if item 9 is applicable) SHANNON STUART, ASST VP Type Name of Individual or Business Type Name of Individual or Business STANDARD FORM — UNIFORM COMMERCIAL CODE — FORM UCC-3 (3) FILING OFFICER COPY-ACKNOWLEDGEMENT (1) FILING OFFICER COPY - ALPHABETICAL Approved by The Secretary of State of Alabama (5) FILE COPY DEBTOR(S) (2) FILING OFFICER COPY - NUMERICAL (4) FILE COPY - SECUREO

Important: Read Instructions on Back Before Filling out Form.

REORDER FROM

STATEMENTS OF CONTINUATION

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