10/31/2002 09:40:00 FILED/CERTIFIED UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] Richard C. Fruechtenicht - (205) 868-3610 B. SEND ACKNOWLEDGMENT TO: (Name and Address) Protective Life Insurance Company P. O. Box 2606 35202 Birmingham, AL Investment Department ATTN: THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1b. This FINANCING STATEMENT AMENDMENT is 1a. INITIAL FINANCING STATEMENT FILE # to be filed [for record] (or recorded) in the 2001-01352 - filed 1/12/2001 - Shelby County, AL REAL ESTATE RECORDS. TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law. ASSIGNMENT (full or pertial): Give name of assignee in item 7a or 7b and address of assignee in item 7c; and also give name of assignor in item 9. 5. AMENDMENT (PARTY INFORMATION): This Amendment affects | Debtor or | Secured Party of record. Check only one of these two boxes. Also check one of the following three boxes and provide appropriate information in items 6 and/or 7. "] ADD name: Complete Item 7a or 7b, and also CHANGE name and/or address: Give current record name in item 6s or 6b; also give new DELETE name: Give record name item 7c; also complete items 7d-7g (if applicable). to be deleted in item 6a or 6b. name (If name change) in Item 7s or 7b and/or new address (if address change) in item 7c. 6. CURRENT RECORD INFORMATION: 66. ORGANIZATION'S NAME Morning Sun Villas, L.L.C., an Alabama limited liability companý OR 66. INDIVIDUAL'S LAST NAME MIDDLE NAME SUFFIX FIRST NAME 7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME SUFFIX MIDDLE NAME FIRST NAME COUNTRY STATE POSTAL CODE ary 7c. MAILING ADDRESS 7g. ORGANIZATIONAL ID #, if any 71. JURISDICTION OF ORGANIZATION 7d TAX ID # SSN OR EIN ORGANIZATION DEBTOR 8. AMENDMENT (COLLATERAL CHANGE): check only one box. Describe colleteral 💢 deleted or 🗌 added, or give entire 🗌 restated collateral description, or describe collateral 🔲 assigned. THIS IS A PARTIAL RELEASE OF COLLATERAL

Unit 707, in Horizon, a Condominium, as established by that certain Declaration of Condominium of Horizon, a Condominium, which is recorded in Instrument 2001-40927, to which Declaration of Condominium a plan is attached as Exhibit "A" thereto, said Plan being filed for record in Map Book 28, Page 141 in the Probate Office of Shelby County, Alabama, and to which said Declaration of Condominium the By-Laws of The Horizon Condominium Association is attached as Exhibit "D" together with an undivided interest in the Common Elements assigned to said units, as shown in Exhibit "C" of said Declaration of Condominium of Horizon, a Condominium.

| e. ORGANIZATION'S NAME | | | |
|---------------------------|------------|-------------|--------|
| Protective Life Insuran | ce Company | | |
| b. INDIVIDUAL'S LAST NAME | FIRST NAME | MIDDLE NAME | SUFFIX |
| | | | |