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	20031222000822490 Pg 1/2 34.00 Probate, AL
CINIANIONIO OTATEMENT ARRENIDARENT	20031222000822490 Pg   Probate, AL Shelby Cnty Judge of Probate, AL 12/22/2003 14:15:00 FILED/CERTIFIES

JCC FINANCING STATEMENT AMENDME	NT	12/	22/2003	14:15:00 FILED/C	FKITLIED
OLLOW INSTRUCTIONS (front and back) CAREFULLY	<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>				
A. NAME & PHONE OF CONTACT AT FILER [optional]					
B. SEND ACKNOWLEDGMENT TO: (Name and Address)					
6492489					
Diligenz, Inc. 6500 Harbour Heights Pkwy, Suite 400 Mukilteo, WA 98275					
Filed in: Alaba	ma Shelby	THE ABOVE SPA	CE IS FO	R FILING OFFICE USE	ONLY
1a. INITIAL FINANCING STATEMENT FILE # 93-40695 12/20/1993				FINANCING STATEMENT  e filed [for record] (or record	
2. TERMINATION: Effectiveness of the Financing Statement identified above	e is terminated with respect t		RE/	L ESTATE RECORDS.	<del></del>
3. CONTINUATION: Effectiveness of the Financing Statement identified a continued for the additional period provided by applicable law.	bove with respect to security	y interest(s) of the Secured	Party autho	rizing this Continuation Sta	tement is
4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b an					
5. AMENDMENT (PARTY INFORMATION): This Amendment affects Also check one of the following three boxes and provide appropriate information in	Debtor <u>or</u> Secured Par in items 6 and/or 7.	ty of record. Check only <u>on</u>	<u>e</u> of these t	wo boxes.	
CHANGE name and/or address: Please refer to the detailed instructions in regards to changing the name/address of a party.	DELETE name: Given			ame: Complete item 7a or 7b, <u>omplete items 7e-7g (if applica</u>	
6. CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME					
OR 6b. INDIVIDUAL'S LAST NAME	FIRST NAME	<u>.                                    </u>	MIDDLE	VAME	SUFFIX
PARKER	DONOVAN		E		
7. CHANGED (NEW) OR ADDED INFORMATION:					
7a. ORGANIZATION'S NAME					
7b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE	NAME	SUFFIX
7c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
7d. SEE INSTRUCTIONS ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR	7f. JURISDICTION OF	ORGANIZATION	7g. ORG.	ANIZATIONAL ID#, if any	NONE
8. AMENDMENT (COLLATERAL CHANGE): check only one box.		r			
Describe collateral deleted or added, or give entire restated colla	teral description, or describ	e collateralassigned.			
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS A	MENDMENT (name of ass	signor, if this is an Assignme	nt). If this is	an Amendment authorized I	by a Debtor which
adds collateral or adds the authorizing Debtor, or if this is a Termination authorized. ORGANIZATION'S NAME	ed by a Debtor, check here	and enter name of DEB	IOR autho	rizing this Amendment.	<u></u>
COMPASS BANK					
9b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE	NAME	SUFFIX
10.OPTIONAL FILER REFERENCE DATA				<del> </del>	
77-0001832263-032852 01-225 SW 1/4 SW	1/4 SHELBY CO	DUNTY			6492489

UC	C FINANC	ING STATE	MENTAMENDME	ENT ADDENDUM
FOL	LOW INSTRUC	TIONS (front and ba	ck) CAREFULLY	
		ING STATEMENT F 12/20/1993	TLE # (same as item 1a on Amer	idment form)
	12a. ORGANIZAT	TION'S NAME	THIS AMENDMENT (same as i	tem 9 on Amendment form)
OR	12b. INDIVIDUAL	'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX
13.	Use this space t	for additional informa	ation	

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

DEBTOR NAME:DONOVAN E. & BARBARA F. PARKER
DEBTOR ADDRESS:2119 FORESTDALE BLVD.
DEBTOR C/ST/ZIP:FORESTDALE, AL 35214

SECURED PARTY NAME: COMPASS BANK SECURED PARTY ADDRESS: 15 SOUTH 20TH STREET SECURED PARTY C/ST/ZIP: BIRMINGHAM AL 35233