UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] B. SEND ACKNOWLEDGMENT TO: (Name and Address) Alabana Gas Corporation #20 South 20th Street Birmingham, AL 35295	Shelby County 28.00 +7.50 04	20040525000278730 Shelby Cnty Judge 05/25/2004 15:17:	Of blobgie: Hr
DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor na 1a. ORGANIZATION'S NAME		E SPACE IS FOR FILING OFFICE (JSE ONLY
OR 1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
Moore	Tim		
1c. MAILING ADDRESS	CITY	STATE POSTA_CODE	COUNTRY
1d. TAX ID #: SSN OR EIN ABBY INFORE FIE. TYPE OF ORGANIZATION DEBTOR	ON 11. JURISDICTION OF ORGANIZATION	AT. 35,242 1g. ORGANIZATIONAL 1D#, if ar	USA NONE
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert or 2a. ORGANIZATION'S NAME	nly <u>one</u> debtor name (2a or 2b) - do not abbreviate or co	mbine names	
OR 2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
2d. TAX ID #: SSN OR EIN ADD'L INFO RE 2e. TYPE OF ORGANIZAT ORGANIZATION DEBTOR	ION 2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if ar	none
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of	SIGNOR S/P) - insert only <u>one</u> secured party name (3a	or 3b)	
OR Alabama Gas Corporation 3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
#20 South 20th Street	Birmingham	AT. 35295	LISA
24		, , /U.S.	

M/N: TUD080C948K S/N: 4142UKP1G FURNACE

M/N: TXC048C4HPDO S/N: 35221KW5G COIL

#5000,00

ALTERNATIVE DECIONATION SET OF ALLE					
. ALTERNATIVE DESIGNATION [if applicable]: LESS				AG. LIEN	NON-UCC FILING
This FINANCING STATEMENT is to be filed (for reco	ord] (or recorded) in the REAL [1]	7 Check to REQUEST SEARCH [ADDITIONAL FEE]	REPORT(S) on Debtor(s) [All Debtors	Debtor 1 Debtor 2
3. OPTIONAL FILER REFERENCE DATA					

20040525000278730 Pg 2/2 35.50 Shelby Cnty Judge of Probate, AL 05/25/2004 15:17:00 FILED/CERTIFIED

CC FINANCING STATEM LLOW INSTRUCTIONS (front and back					
NAME OF FIRST DEBTOR (1a or 1b	أحاك المراكز	ATEMENT			
9a. ORGANIZATION'S NAME	7, 0,11,120,11,11,11,11,11,11,11,11,11,11,11,11,11				
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX			
Moore	Tim				
.MISCELLANEOUS:					
. ADDITIONAL DEBTOR'S EXACT F	III LEGAL NAME - insert only one	name (11a or 11h) - do not abbreviat		IS FOR FILING OFFICE	JSE ONLY
11a. ORGANIZATION'S NAME	OLL LCOAL IVAIVIL - IIISelf Ulily <u>Ulie</u>	name (Tra or Tro) - do not abbreviat	e or combine names		<u> </u>
R					T
11b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	NAME	SUFFIX
c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
d. TAX ID #: SSN OR EIN ADD'L INFO R ORGANIZATIO DEBTOR		11f. JURISDICTION OF ORGANIZ	ATION 11g. OR	GANIZATIONAL ID #, if any	N
ADDITIONAL SECURED PART 12a. ORGANIZATION'S NAME	Y'S or ASSIGNOR S/P'S	NAME - insert only <u>one</u> name (1	2a or 12b)		
R Capital Heating & Cooling 12b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	MIDDLE NAME	
c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
524-A Mineral	Trace	Hoover	AL	35244-4571	USA
This FINANCING STATEMENT covers collateral, or is filed as a fixture filing. Description of real estate.	£I	16. Additional collateral description	DM:		
16 Meadowood Es	tates				
Book 10 Page 33					
. Name and address of a RECORD OWNER	of above-described real estate				
(if Debtor does not have a record interest):					
		17. Check only if applicable and o			
		Debtor is a Trust or Trust	نساسا سارساس اسارسان سانسان سانسان سانسان	roperty held in trust or D	ecedent's Es
		18. Check <u>only</u> if applicable and o			
		Debtor is a TRANSMITTING U Filed in connection with a Mai		n — effective 30 vears	
		Filed in connection with a Mar	to en	. J. John Oo yourd	