



UCC FINANCING STATEMENT AMENDMEN			
FOLLOW INSTRUCTIONS (front and back) CAREFULLY			
A. NAME & PHONE OF CONTACT AT FILER [optional]			
J. RUFFIN/205.226.1902			
B. SEND ACKNOWLEDGMENT TO: (Name and Address)			
ALABAMA POWER COMPANY			
600 NORTH 18TH STREET			
BIRMINGHAM, AL 35291			
	THE ABOVE SP	ACE IS FOR FILING OFFICE USE	DNLY
1a. INITIAL FINANCING STATEMENT FILE #		1b. This FINANCING STATEMENT	MENDMENT is
2001-25176/SHELBY		to be filed [for record] (or recorde REAL ESTATE RECORDS.	ed) in the
2. TERMINATION: Effectiveness of the Financing Statement identified above is	s terminated with respect to security interest(s) of the		
3. CONTINUATION: Effectiveness of the Financing Statement identified abortional continued for the additional period provided by applicable law.			
4.   ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and a	address of assignee in item 7c; and also give name o	f assignor in item 9.	
5. AMENDMENT (PARTY INFORMATION): This Amendment affects Del			
Also check one of the following three boxes and provide appropriate information in i			
CHANGE name and/or address: Give current record name in item 6a or 6b; also name (if name change) in item 7a or 7b and/or new address (if address change)		ne DADD name: Complete item 7a ditem 7c; also complete items 7d	or 7b, and also
6. CURRENT RECORD INFORMATION:	THE TOTAL OF THE PARTY OF THE P		
6a. ORGANIZATION'S NAME			
OR 6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
SHRADER	HAROLD		
7. CHANGED (NEV/) OR ADDED INFORMATION:			
7a. ORGANIZATION'S NAME			
7b. INDIVIDUAL S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
SHRADER	BETTY		
7c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
195 VALENTINE TRL	WILSONVILLE	AL 35186	
ADD'L INFO RE 7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if any	
ORGANIZATION DEBTOR			NONE
8. AMENDMENT (COLLATERAL CHANGE): check only one box.			
Describe collateral deleted or added, or give entire restated collater	al description, or describe collateral assigned.	•	
<ol> <li>NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AM adds collateral or acds the authorizing Debtor, or if this is a Termination authorized</li> </ol>			y a Debtor which
adds collateral or acds the authorizing Debtor, or if this is a Termination authorized 9a. ORGANIZATION'S NAME	by a Debitor, Check liefe and enter harne of DC		<del></del>
OR St. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
SO, HADIVIDUMES EMOT NAME			
			<u></u>
10. OPTIONAL FILER REFERENCE DATA			