I. RUFFIN/205.226.1902 B. SEND ACKNOWLEDGMENT TO: (Name and Address) ALABAMA POWER COMPANY 600 NORTH 18TH STREET BIRMINGHAM, AL 35291 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1s. INITIAL FINANCING STATEMENT FILE # 200209190000452510/SHELBY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1s. INITIAL FINANCING STATEMENT AND THE # 200209190000452510/SHELBY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1s. INITIAL FINANCING STATEMENT AND THE # 200209190000452510/SHELBY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1s. INITIAL FINANCING STATEMENT AND THE # 1	JCC FINANCING STATEMENT AMENDM OLLOW INSTRUCTIONS (front and back) CAREFULLY	ENT	20070326000134360 Shelby Cnty Judge	
THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY TO INITIAL PRANCING STATEMENT FILE # 2002/09/19/00/04525 IO/SHELBY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE	A. NAME & PHONE OF CONTACT AT FILER [optional] I RUFFIN/205 226.1902		03/26/2007 11:12:	of Probate, AL
6. CURRENT ROCK NAME 6. CURRENT ROCK TAME 6. CURRENT ROCK TO A protection of the region of the rock of a protection or items of each grain or items of a section or items				"" FILED/CERT
19. NOTAL FRANKONS STATEMENT FILE # 10 10 10 10 10 10 10	600 NORTH 18TH STREET			
19. NOTAL FRANKONS STATEMENT FILE # 10 10 10 10 10 10 10		THE A	BOVE SPACE IS FOR FILING OFFICE	USE ONLY
3. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Society and University of the Society			1b. This FINANCING STATE	MENT AMENDMENT is
Se, ORGANIZATION'S NAME OR Sb. INDIVIDUAL'S LAST NAME HOLSOMBECK DALE A. CHANGED (NEW) OR ADDED INFORMATION: Ta. ORGANIZATION S NAME OR Tb. INDIVIDUAL'S LAST NAME HOLSOMBECK DAWN M. Tc. MAILING ADDE INFORMATION: Tc. MAILING ADDE INFORMATION: Tc. MAILING ADDRESS OTY ADDRESS OTY ORGANIZATION DEBTOR B. AMENDMENT (COLLATERAL CHANGE): check only sole box. Describe colleteral deleted or dadded, or give entire restated collateral description, or describe colloveral assigned. S. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing below. DR. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing below. DR. ALABAMA POWER COMPANY	CONTINUATION: Effectiveness of the Financing Statement identified continued for the additional period provided by applicable law. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b AMENDMENT (PARTY INFORMATION): This Amendment affects Also check one of the following three boxes and provide appropriate information CHANGE name and/or address: Give current record name in item 6a or 6l name (if name change) in item 7a or 7b and/or new address (if address change)	and address of assignee in item 7c; and also go Debtor or Secured Party of record. Con in items 6 and/or 7.	the Secured Party authorizing this Continuation of the secure of these two boxes.	on Statement is
HOLSOMBECK 7. CHANGED (NEW) OR ADDED INFORMATION: 7. ORGANIZATION'S NAME PROSTAL CODE 1. INDIVIDUAL'S LAST NAME HOLSOMBECK 1. DAWN M. STATE POSTAL CODE COUNTRY AL 35080 7. JURISDICTION OF ORGANIZATION CROANIZATION CORGANIZATION TO JURISDICTION OF ORGANIZATION TO JURISDICTION OF ORGANIZATION OF O				
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FIRST NAME FIRST NAME FIRST NAME FIRST NAME FIRST NAME FIRST NAME HOLDEN NAME SUFFIX	· · · · · · · · · · · · · · · · · · ·			
77. MAILLING ADDRESS 901 JACKSON CIR HELENA AL 35080 ADDLINFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION ORGANIZATION DEBTOR Postal Code COUNTRY	7b. INDIVIDUAL'S LAST NAME			SUFFIX
901 JACKSON CIR ADD_LINFO RE 7e. TYPE OF ORGANIZATION 7f. JURISDICTION OF ORGANIZATION 7g. ORGANIZATIONAL ID #, if any Non Non				COUNTRY
ORGANIZATION DEBTOR 8. AMENDMENT (COLLATERAL CHANGE): check only one box. Describe collateral deleted or del				
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here and enter name of DEBTOR authorizing this Amendment. 9a. ORGANIZATION'S NAME ALABAMA POWER COMPANY	ORGANIZATION 1	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if	any
9a. ORGANIZATION'S NAME ALABAMA POWER COMPANY	Describe collateral deleted or added, or give entire restated co	AMENDMENT (name of assignor, if this is	an Assignment). If this is an Amendment autho	-
		and enter in		L.
9b. INDIVIDUAL'S LAST NAME SUFFIX				
	JK [at 11]	EIDST NAME	MIDDLE NAME	SUFFIX