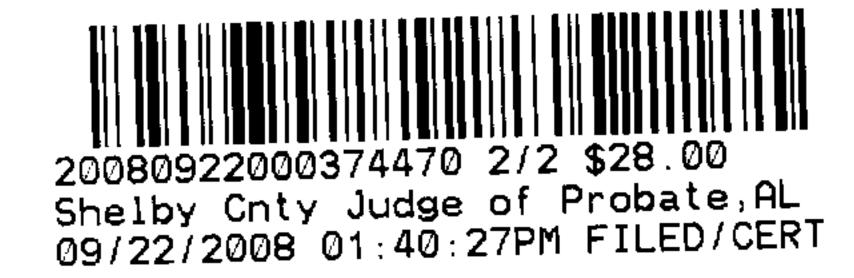


UCC FINANCING STATEMENT AMENDMENT

A. NAME & PHONE OF CONTACT AT FILER [optional]			
3. SEND ACKNOWLEDGMENT TO: (Name and Address)			
Highlands Premier Accepta P.O. Box 2829 Littleton, CO 80161	nce Corp.		
a. INITIAL FINANCING STATEMENT FILE #	THE ABOVE	SPACE IS FOR FILING OFFICE	
Inst #20030513000299310 and 2	20030729000486890	to be filed [for record] (or REAL ESTATE RECORD	
TERMINATION: Effectiveness of the Financing Statement identified	· · · · · · · · · · · · · · · · · · ·		
CONTINUATION: Effectiveness of the Financing Statement identication continued for the additional period provided by applicable law.	fied above with respect to security interest(s) of the Secu	ared Party authorizing this Continuation	on Statement is
ASSIGNMENT (full or partial): Give name of assignee in item 7a or	7b and address of assignee in item 7c; and also give nam	e of assignor in item 9.	
. AMENDMENT (PARTY INFORMATION): This Amendment affects		y <u>one</u> of these two boxes.	
Also check one of the following three boxes and provide appropriate informations of the CHANGE name and/or address: Give current record name in item 6a of the current record name in it	r 6b; also give new DELETE name: Give record r		
name (if name change) in item 7a or 7b and/or new address (if address CURRENT RECORD INFORMATION:	change) in item 7c. to be deleted in item 6a or 6b.	item 7c; also complete ite	ems 7d-7g (if applicable
6a. ORGANIZATION'S NAME			
OR 6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
Roberson	James		
. CHANGED (NEW) OR ADDED INFORMATION:			
7a. ORGANIZATION'S NAME			
Highlands Premier Acceptar	FIRST NAME	IMIDDLE NAME	SUFFIX
c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
P.O. Box 2829	Littleton	CO 80161	US
d. TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZAT * ORGANIZATION REQUIRED IN WISCONSIN DEBTOR	ION 7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if	any
3. AMENDMENT (COLLATERAL CHANGE): check only one box.			
Describe collateral deleted or added, or give entire estated	collateral description, or describe collateral assign	ed.	
	· 	** ** O C	
For property located at: 117	6 Autumn Lane, Vincent	2, AL 35178	
See Exhibit "A"			
' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	_ ~		
Maximum principal indebtedne	ss for Alabama tax pur	poses: \$4995.0	0
		· · · · · · · · · · · · · · · · · · ·	
. NAME OF SECURED PARTY OF RECORD AUTHORIZING TH adds collateral or adds the authorizing Debtor, or if this is a Termination au		nment). If this is an Amendment autho DEBTOR authorizing this Amendment	•
9a. ORGANIZATION'S NAME	<u> </u>	······································	
Highlands Premier Acceptant			
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
			ļ ,
) OPTIONAL FILER REFERENCE DATA			

FILING OFFICE COPY — NATIONAL UCC FINANCING STATEMENT AMENDMENT (FORM UCC3) (REV. 07/29/98)

^{*} An Individual's social security number is not required to be placed on the form in Wisconsin (See Instructions)



From the Southwest corner of the Northeast 1/4 of the Northwest 1/4 of Section 10, Township 19 South, Range 2 East also being the point of beginning;run Southeasterly along the South line of said 1/4-1/4 distance of 1308.41 feet to the Southwest right-of-way line of a railroad;thence left 126' -10'-32' along the right-of-way of said railroad a distance of 199.13 feet;and a delta of 12'31'37' an arc distance of 399.59 feet;thence left from the tangent of said curve 43'-46'-20' a distance of 1075.35 feet; thence left 112'-38'-11' a distance of 919.30 feet to the point of beginning. Said property contains 17.9 acres more or less