

UCC FINANCING STATEMENT AMENDMEN							
FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional]							
John L. Hartman, III (205) 879-0500							
B. SEND ACKNOWLEDGMENT TO: (Name and Address)							
John L. Hartman, III	4						
Hartman & Springfield P. O. Box 846							
Birmingham, AL 35201-0846							
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THE ABOVE SPACE IS FOR FILING OFFICE USE (1a. INITIAL FINANCING STATEMENT FILE#							
20051024000550580							
2. TERMINATION: Effectiveness of the Financing Statement Identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement.							
3. CONTINUATION: Effectiveness of the Financing Statement identified about	·						
continued for the additional period provided by applicable law.							
4. ASSIGNMENT (full or partial): Give name of assignee in Item 7s or 7b and a	address of assignee in item	7c; and also give name of	assignor in item 9.				
5. AMENDMENT (PARTY INFORMATION): This Amendment affects Del	btor or Secured Part	of record. Check only on	e of these two boxes.				
Also check one of the following three boxes and provide appropriate information in it							
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)	in item 7c. to be d	E name: Give record name eleted in item 6a or 6b.	ADD name: Complete item 7 item 7c; also complete items	'a or 7b, and also 7d-7g (if applicable).			
6. CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME			· · · · · · · · · · · · · · · · · · ·				
Cahaba Beach Investments, LLC							
OR 66. INDIVIDUAL'S LAST NAME	FIRST NAME	· · · · · · · · · · · · · · · · · · ·	MIDDLE NAME	SUFFIX			
				SOFFIX			
7. CHANGED (NEW) OR ADDED INFORMATION:	······································						
7a. ORGANIZATION'S NAME							
OR							
7b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE NAME	SUFFIX			
	CITY						
7c. MAILING ADDRESS			STATE POSTAL CODE	COUNTRY			
ADD'L INFO RE 78. TYPE OF ORGANIZATION	76 IUDISDICTION OF	DCANIZATION	7- ODCANIZATIONAL (D.#. 1/2				
ORGANIZATION DEBTOR	7f. JURISDICTION OF ORGANIZATION		7g. ORGANIZATIONAL ID #, if any				
8. AMENDMENT (COLLATERAL CHANGE): check only one box.		· · · · · · · · · · · · · · · · · · ·		NONE			
Describe collateral deleted or added, or give entire restated collatera	i description or describe	collateral Tassianed					
	ar occurpatori, or occurac	Constellar Lassigned.					
PARTIAL:							
Unit 145, Building 32, in Edenton, a	Condomini	m. as recor	ded in the 4th A	mended			
Condominium Plat, in Map Book 40, Page 54, in the Probate Office of Shelby							
County, Alabama.							
O NAME OF SECURED DARRY OF DECODO AUTHORIZADO TUTO AND	**************************************						
 NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AME adds collateral or adds the authorizing Debtor. or if this is a Termination authorized I 	NDMENT (name of assignment and the control of the c	nor, if this is an Assignment and enter name of DEBT	(). If this is an Amendment authorized OR authorizing this Amendment	by a Debtor which			
9a. ORGANIZATION'S NAME							
Compass Bank							
9b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE NAME	SUFFIX			
10. OPTIONAL FILER REFERENCE DATA	······································		<u> </u>				
Judge of Probate, Shelby County							