



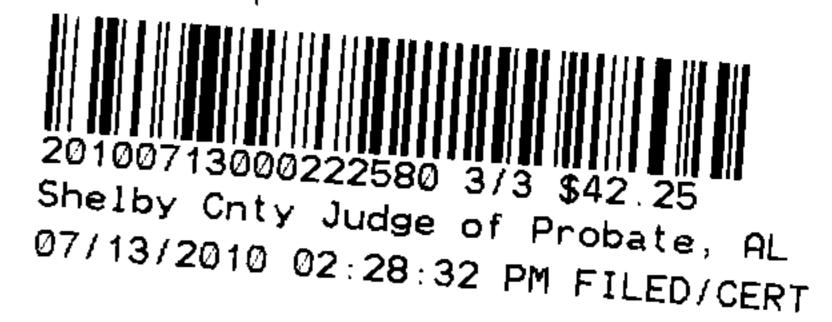
## **UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY		<b></b>	<b>4                                      </b>	
J. Ruffin (205)226-1902				
J. Ruffin (205)226-1902		20100713000		
B. SEND ACKNOWLEDGMENT TO: (Name and Address)		20100713000222580 1/3 \$42.25 Shelby Cnty Judge of Probate,		
		07/13/2010 0	2:28:32 PM FILE	e, AL Dicept
Alabama Power Company				D / CER
600 N. 18th Street				
Birmingham, Alabama 35203				
		C 00 4 0C 10 C0		
		E SPACE IS FU	R FILING OFFICE US	SE ONLY
1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a organization's name)	a or 1b) - do not abbreviate or combine names			
I a. ONGANIZATION SINAME				
OR 45 INDIVIDUALIC LACT MANE	TEIDOT NAME	TAIDDLE		TOUTTIV
1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
Seay	Jons			
1c. MAILING ADDRESS	CITY D. P	STATE	POSTAL CODE	COUNTRY
5136 COLONIAL MARK ICOAD	DIAM	AL	33272	
1d. TAX ID #: SSN OR EIN   ADD'L INFO RE   1e. TYPE OF ORGANIZATION   ORGANIZATION	1f. JURISDICTION OF ORGANIZATION	1g. ORG	ANIZATIONAL ID #, if any	
DEBTOR				NONE
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one	debtor name (2a or 2b) - do not abbreviate or cor	mbine names		
2a. ORGANIZATION'S NAME	•			
2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME SUI		SUFFIX
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
2d. TAX ID #: SSN OR EIN ADD'L INFO RE   2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORG	I ANIZATIONAL ID #, if any	<u> </u>
ORGANIZATION ' DEBTOR I				Плоле
		Ol- \		NONE
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNO 3a. ORGANIZATION'S NAME	JR S/P) - Insert only <u>one</u> secured party name (3a d	or 30)		
Alabama Power				
OR 3b. INDIVIDUAL'S LAST NAME	TFIRST NAME	MIDDLE NAME SUF		SUFFIX
			INITION SOLLIN	
3c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
600 N. 18th Street	Birmingham	AL	35203	US
- OOO IV. TOTAL SHOCK	Diffiningnam		33203	US
4. This FINANCING STATEMENT covers the following collateral:				
THE FOLLOWING HEAT PUMP WAS INSTALL	ED AT THE DESIDENCE LOC	י אתבם אי	LIE DDODEDTY	7
DESCRIBED IN ITEM#14 OF THIS FINANCING		AIEDON		
•	OTTTI LIVILIA I.			
BRAND: GOUDMAN				
				44 6 9 17113
MODEL: SSZ140301	MODEL: CAPF3636		Model: 61	77 80 10 3
		<del></del>	•	
SERIAL: 1005567	SERIAL: 1006756		Serial: 10	05575
		<del></del>		
#				
$\mathbf{J} - \mathbf{J} \mathbf{I} \mathbf{I} \mathbf{\Lambda} \mathbf{\Lambda} \mathbf{\Lambda}$				
AMOUNT: / 10.00				
· · · · · · · · · · · · · · · · · · ·				•
5. ALTERNATIVE DESIGNATION OF COMPRESSION DESCRIPTION OF COMPRESSION OF COMPRESSI	ISIONEE/OONSIONOD	0000000	IVED 1	NONTHOOPING
	ISIGNEE/CONSIGNOR BAILEE/BAILOR  AL 7 Check to REQUEST SEARCH REP			NON-UCC FILING
	icable] [ADDITIONAL FEE]	[optional]	All Debtors	Debtor 1 Debtor 2
8. OPTIONAL FILER REFERENCE DATA				

ICC FINANCING STATEMENT ADDENDUNCTIONS (front and back) CAREFULLY				
. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING S	TATEMENT			
9a. ORGANIZATION'S NAME				
9b. INDIVIDUAL'S LAST NAME FIRST NAME	MIDDLE NAME, SUFFIX			
Seay JOHN		auetby CU	00222580 2/3 \$4 ty Judge of Pro	hate Oi
MISCELLANEOUS:		0//13/2010	02:28:32 PM F	ILED/CERT
THE REAL PROPERTY DESCRIBED ON THE ATT	ACHED DEED:			
		THE ABOVE SPACE	S FOR FILING OFFI	CE USE ONLY
1. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only o	ne name (11a or 11b) - do not abbreviate or	combine names		
11a. ORGANIZATION'S NAME				
R 11b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
J. TAX ID #: SSN OR EIN ADD'L INFO RE 11e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR	11f. JURISDICTION OF ORGANIZATI	ON 11g. ORG	ANIZATIONAL ID#, if a	ny NOI
	P'S NAME - insert only <u>one</u> name (12a o	r 12h)		
2. ADDITIONAL SECURED PARTY'S or ASSIGNOR S/102a. ORGANIZATION'S NAME	O TATAVIL - INSCITOTILY ONLY ONLY ONLY	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<del></del>	<del>``</del>
12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
· · · · · · · · · · · · · · · · · · ·			1	
c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
. This FINANCING STATEMENT covers timber to be cut or as-extract collateral, or is filed as a fixture filing.  . Description of real estate:	ed 16. Additional collateral description:			
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 check			<b>_</b>
		e acting with respect to p	roperty held in trust or	Decedent's Esta
	18. Check <u>only</u> if applicable and check			
	Debtor is a TRANSMITTING UTIL		s effective 20 vees	
	Filed in connection with a Manufa		_	

This instrument was prepared by:
Shelly Moss
Galloway & Moss, L.L.C.
11 Oak Street
Birmingham, Alabama 35213

Send tax notice to: John Seay 5156 Colonial Park Road Birmingham, Alabama, 35242



Ritmingisam, Alabama	33213	WARRANTY I	DEED
STATE OF ALABAMA	)		<del></del>
JEFFERSON COUNTY	: <b>)</b>	KNOW ALL MEN BY THESE PRESENTS	ı
That is Dollars (\$173,400.00) whereof is acknowledge	to the	ideration of One Hundred Seventy Three Thousand Four Hundred and (undersigned grantor(s) in hand paid by the grantee(s) herein, the receipt we,	00/100
		Scott A. Regan and wife Laura S. Regan	
(herein referred to as C	irantoi	r(s)) do grant, bargain, sell and convey unto	
		John Seav	

\$170,000.00 of the proceeds come from a purchase money mortgage recorded simultaneously herewith.

Lot 36, according to the Map and Survey of Meadow

in the probate Office of Shelby County, Alabama.

Situated in Shelby County, Alabama.

Brook 6th Sector, as recorded in Map Book 8, page 44,

(herein referred to as Grantee(s)) the following described real estate situated in Shelby County, Alabama to-

Subject to:

1998 ad valorem taxes not yet due and payable and all easements, rights-of-way and encumbrances of record.

TO HAVE AND TO HOLD Unto the said Grantee(s), his/her/their heirs and assigns,

forever.

wit:

And I/we do for myself/ourselves and for my/our heirs, executors, and administrators covenant with the said Grantee(s), his/her/their heirs and assigns, that I am/we are lawfully seized in fee simple of said premises; that they are free from all encumbrances, unless otherwise noted above; that I/we have a good right to sell and convey the same as aforesaid; that I/we will and my/our heirs, executors and administrators shall warrant and defend the same to the said Grantee(s), his/her/their heirs and assigns forever, against the lawful claims of all persons.

IN WITNESS WHEREOF, I/we have set my/our hand(s) and seal(s), this 10th day of April, 1998.

WITNESS:	(Seal) (Seal)
<del>+</del>	Scott A. Regan
	(Seal) Saura S. Regan (Seal) Laura S. Regan
	Caula 3. Kegan

STATE OF ALABAMA

JEFFERSON COUNTY )

I, the undersigned, a Notary Public in and for said County, in said State, hereby certify that Scott A. Regan and Laura S. Regan whose names are signed to the foregoing conveyance, and who are known to me, acknowledged before me on this day, that being informed of the contents of the conveyance they executed the same voluntarily on the day the same bears date.

Given under my hand and official seal this 10th day of April, 1998.

Notary Public:
My Commission Expires:

2:40 PH CERTIFO SEN COMP. JUNE OF PRINTE SEN COMP. JUNE OF PRINTE