SEND ACKNOWLEDGME	TACT AT FILER [optional] 205-326-8299		2014061 Shelby 06/18/2	8000184410 1/2 \$2 Cnty Judge of Pro 014 01:25:00 PM F	11.50 bate, AL
605	BAMA GAS CORPORATION RICHARD ARRINGTON JR BL MINGHAM, AL 35203	VD N		Y ZS: UU PM F	ILED/CERT
DEDTO 010			SPACE IS FO	R FILING OFFICE USE	ONLY
1a. ORGANIZATION'S NAME	LEGAL NAME - insert only <u>one</u> debtor name (1a or 1b)) - do not abbreviate or combine names		<u></u> ., .	
Tb. INDIVIDUAL'S LAST NAM		FIRST NAME	MIDDLE	IAME	SUFFIX
VINCENT		GREGORY	LYN		
MAILING ADDRESS	<u></u>	CITY		POSTAL CODE	COUNTRY
227 VICTORIA DE	t	PELHAM	AL	35124-3127	US
	ADD'L INFO RE 1e. TYPE OF ORGANIZATION ORGANIZATION	1f. JURISDICTION OF ORGANIZATION	1g. ORGA	NIZATIONAL ID#, if any	г 1
	DEBTOR		· · · · · · · · · · · · · · · · · · ·		
2a. ORGANIZATION'S NAMI	EXACT FULL LEGAL NAME - insert only <u>one</u> d	ebtor name (2a or 2b) - do not abbreviate or comb	oine names	······································	
2b. INDIVIDUAL'S LAST NA	<u></u>	FIRST NAME	MIDDLE	IAME	SUFFIX
ZD. MADIAIDONE O EXCITANT	*·· —				
. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
CELINCTONS	ADD'L INFO RE 2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORG/	NIZATIONAL ID #, if any	
Not Applicable	ORGANIZATION I				\square_{N}
	AME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/F	P) - insert only <u>one</u> secured party name (3a or 3b)	<u> </u>	· <u></u>	
3a. ORGANIZATION'S NAM					
ALABAMA GAS 3b. INDIVIDUAL'S LAST NA	S CORPORATION ME	FIRST NAME	MIDDLE NAME		SUFFIX
				<u></u>	
		CITY	STATE	POSTAL CODE	COUNTRY
. MAILING ADDRESS		BIRMINGHAM	AL	35203	US

8. OPTIONAL FILER REFERENCE DATA

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LOW INSTRUCTIONS (front and I	1b) ON RELATED FINANCING STA	ATEMENT				
9a. ORGANIZATION'S NAME						
<u> </u>	· · · · · · · · · · · · · · · · · · ·					
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX			184410 2/2 \$41.	
VINCENT	GREGORY	LYNN			Judge of Proba 01:25:00 PM FIL	
					IS FOR FILING OFFI	CE USE ONL'
ADDITIONAL DEBTOR'S EXACT 11a. ORGANIZATION'S NAME	FULL LEGAL NAME - insert only one	name (11a or 11b) - do not abbrevi	ate or combine nam	es	· 	<u> </u>
11b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE	NAME	SUFFIX
AAAU ING ADDDE GG	·	CITY	··	STATE	POSTAL CODE	COUNTR
MAILING ADDRESS		CITY		JOINIE	1 COINE CODE	
WALLE						
SEEINSTRUCTIONS ADD'L INFO		11f. JURISDICTION OF ORGAN	IIZATION	11g. OR	GANIZATIONAL ID #, if a	ny
		11f. JURISDICTION OF ORGAN	IIZATION	 11g. ORG	SANIZATIONAL ID#, if a	
SEEINSTRUCTIONS ADD'L INFO ORGANIZA DEBTOR ADDITIONAL SECURED PA	TION	11f. JURISDICTION OF ORGAN NAME - insert only <u>one</u> name		11g. OR	SANIZATIONAL ID#, if a	
SEEINSTRUCTIONS ORGANIZA ORGANIZA DEBTOR ADDITIONAL SECURED PA 12a. ORGANIZATION'S NAME	TION			11g. OR(SANIZATIONAL ID#, if a	
SEEINSTRUCTIONS ORGANIZA ORGANIZA DEBTOR ADDITIONAL SECURED PA 12a. ORGANIZATION'S NAME CONTROL TEMP	TION			11g. ORG		
SEEINSTRUCTIONS ORGANIZA ORGANIZA DEBTOR ADDITIONAL SECURED PA 12a. ORGANIZATION'S NAME	TION	NAME - insert only <u>one</u> name				
SEEINSTRUCTIONS ORGANIZA ORGANIZA DEBTOR ADDITIONAL SECURED PA 12a. ORGANIZATION'S NAME CONTROL TEMP	TION	NAME - insert only <u>one</u> name				SUFFIX
SEEINSTRUCTIONS ORGANIZA DEBTOR ADDITIONAL SECURED PA 12a. ORGANIZATION'S NAME CONTROL TEMP 12b. INDIVIDUAL'S LAST NAME	TION	NAME - insert only <u>one</u> name FIRST NAME		MIDDLE	NAME	
SEEINSTRUCTIONS lot Applicable ADDITIONAL SECURED PA 12a. ORGANIZATION'S NAME CONTROL TEMP 12b. INDIVIDUAL'S LAST NAME MAILING ADDRESS 7 MARKEETA RD This FINANCING STATEMENT covers collateral, or is filed as a Description of real estate:	ARTY'S or ASSIGNOR S/P'S timber to be cut or as-extracted	FIRST NAME CITY LEEDS	(12a or 12b)	MIDDLE	NAME POSTAL CODE	SUFFIX
SEEINSTRUCTIONS ORGANIZA DEBTOR ADDITIONAL SECURED PA 12a. ORGANIZATION'S NAME CONTROL TEMP 12b. INDIVIDUAL'S LAST NAME MAILING ADDRESS 7 MARKEETA RD This FINANCING STATEMENT covers collateral, or is filed as a fixture filit	ARTY'S or ASSIGNOR S/P'S timber to be cut or as-extracted ing.	FIRST NAME CITY LEEDS	(12a or 12b)	MIDDLE	NAME POSTAL CODE	SUFFIX
SEEINSTRUCTIONS Of Applicable ADDITIONAL SECURED PA 12a. ORGANIZATION'S NAME CONTROL TEMP 12b. INDIVIDUAL'S LAST NAME MAILING ADDRESS 7 MARKEETA RD This FINANCING STATEMENT covers collateral, or is filed as a Description of real estate: 27 VICTORIA DR	ARTY'S or ASSIGNOR S/P'S timber to be cut or as-extracted ing. ON 2ND SECTOR E 48 52.035	FIRST NAME CITY LEEDS	(12a or 12b)	MIDDLE	NAME POSTAL CODE	SUFF

Debtor is a Trust or Trustee acting with respect to property held in trust or Decedent's Estate

Filed in connection with a Manufactured-Home Transaction — effective 30 years

Filed in connection with a Public-Finance Transaction — effective 30 years

18. Check only if applicable and check only one box.

Debtor is a TRANSMITTING UTILITY