

The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n).

No. of Additional Sheets Presented:

This FINANCING STATEMENT is presented to a Filing Officer for filing pursuant to the Uniform Commercial Code.

1. Return copy or recorded original to

THIS SPACE FOR USE OF FILING OFFICER
Date, Time, Number & Filing Office

American Bankers Financial Services Inc.
1775 R.W. Berends Dr. SW
Grand Rapids, MI 49509

Pre-paid Acct. # _____

2. Name and Address of Debtor (Last Name First if a Person)

Winfield, Ronald W.
One Mile South of Vandiver
West Side of Shelby County Rd. #45
Vandiver, AL 35176

Social Security/Tax ID # _____

2A. Name and Address of Debtor (IF ANY) (Last Name First if a Person)

Social Security/Tax ID # _____

Additional debtors on attached UCC-E

3. SECURED PARTY (Last Name First if a Person)

American Bankers Financial Services Inc.
1775 R.W. Berends Dr. SW
Grand Rapids, MI 49509

Social Security/Tax ID # _____

Additional secured parties on attached UCC-E

5. This statement refers to original Financing Statement bearing File No. **013350**

Filed with **Shelby County**

Date Filed **December 30**, 19**90**

- 6. Continuation. The original financing statement between the foregoing Debtor and Secured Party, bearing file number shown above, is still effective.
- 7. Termination. Secured Party no longer claims a security interest under the financing statement bearing the file number shown above.
- 8. Partial or Full Assignment. The Secured Party's right under the financing statement bearing file number shown above to the property described in item 11 or to all of the property listed on this file, is assigned to the assignee whose name and address appears in item 4.
- 9. Amendment. Financing statement bearing file number shown above is amended as set forth in item 11.
- 10. Partial Release. Secured Party releases the collateral described in item 11 from the financing statement bearing file number shown above.

11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing:

Check X if covered: Products of Collateral are also covered.

Signature(s) of Debtor(s)

Signature(s) of Debtor(s) (necessary only if item 9 is applicable)

Type Name of Individual or Business

Signature(s) of Secured Party(ies)

Robert W. Horstange

Signature(s) of Secured Party(ies)

American Bankers Financial Services Inc.

Type Name of Individual or Business

026827

STATE OF ALA. SHELBY CO.
I CERTIFY THIS INSTRUMENT WAS FILED
90 OCT 29 PM 2:02
JUDGE OF PROBATE

12360