Return copy or recorded original to	THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office
LANGE, SIMPSON, ROBINSON & SOMERVILLE	
1700 FIRST ALABAMA BANK BUILDING	
BIRMINGHAM, AL 35203	
ATTN: MR. RICHARD TISHLER	. The
Pro part Apet #	
Pre-paid Acct. #	- <i>c</i>
!	
Joiner Jason	
P.O. Box 86	
Shelby, A1. 35143	
Social Security/Tax ID #	
2A Name and Address of Debtor (IF ANY) (Last Name First if a Person)	
Joiner, Deborah	
P.O. Box 86	
Shelby, Al. 35143	7***
Social Security/Tax ID #	Accience Manuelie Federal Deals Federal
Additional debtors on attached UCC-E	Assignee: Magnolia Federal Bank For Savings
3. SECURED PARTY (Last Name First if a Person)	4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)
RESOLUTION TRUST CORPORATION, RECEIVER	C/O ROSE DISCOUNT MOBILE HOMES, INC.
FOR CITY FEDERAL SAVINGS AND LOAN ASSOCIATION	ATTN: MR. TOMMY ROSE
2030 SECOND AVENUE, NORTH	ROUTE 1, BOX 185-B
BIRMINGHAM, AL 35203	HICKORY, MS 39332
Social Security/Tax ID #	THORONT, ING USUSE
Additional secured parties on attached UCC-E	
5 C) The statement of the transfer of the state of the s	
5. This statement refers to original Financing Statement bearing File No. $\frac{017452}{\text{Shelby Co.}}$	Date Filed June 22 19 87
6 Continuation. The original financing statement between the foregoing Debtor and Secured	
7 📙 Termination - Secured Party no longer claims a security interest under the financing statem	ent bearing the file number shown above.
8. Partial or The Secured Party's right under the financing statement bearing file number of X Xull property described in item 11 or to all of the property listed on this file, is assigned.	
Assignment. whose name and address appears in item 4.	
9. Amendment Financing statement bearing file number shown above is amended as set fort 10. Partial Secured Party releases the collateral described in item 11 from the financing	h in item 11. statement bearing tite
Release number shown above.	09-4080
	•
	11A. Enter Code(s) From Back of Form That
•	Best Describes The Cottateral Covered
1/20	By This Filing:
[].00	+1.00 = 12.00
	<u> </u>
Check X if covered: Products of Collateral are also covered.	
Officer X ii covered. In Products of Collateral are also covered.	RESOLUTION TRUST CORPORATION DECEIVED FOR
	RESOLUTION TRUST CORPORATION RECEIVER FOR CITY FERENCE SAVINGS AND CONTROL OF
Signature(s) of Debtor(s)	Higgs of the office of the state of the stat
Signature(s) of Debtor(s) (necessary only if item 9 is applicable)	Y: ITS ATTORNEY - IN - FACT
	ITS ATTORNEY - IN - FACT
Type Name of Individual or Business	Type Name of Individual or Business
(1) FILING OFFICER COPY ALPHABETICAL (3) FILING OFFICER COPY ACKNOWLEDGEMENT (2) FILING OFFICER COPY NUMERICAL (4) FILE COPY SECOND PARTY(S)	STANDARD FORM — UNIFORM COMMERCIAL CODE FORM UCC-3 (5) FILE COPY DEBTOR(S) Approved by The Secretary of State of Alabama

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

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

No. of Additional Sheets Presented:

			·	_	
Name and Address of Debtor	(Last Name First if a Person)	THIS SPACE FOR USE OF FILING O Date, Time, Number & Filing Office			
Joiner, Otha					
P.O. Box 86					
Shelby, A1. 35143					
Social Security/Tax ID #		•			
1A. Name and Address of Debtor (IF ANY)	(Last Name First if a Person)				8
	(===::,				
Joiner, Eloise P.O. Box 86					
Shelby, Al.35143				105 -∞ €	
Discuby, Art. JJ143					
				E	
Social Security/Tax ID #				(1)	
2 SECURED DARTY / ant Name Single is a Dannel				$\bar{\omega}$	
2. SECURED PARTY) (Last Name First if a Person)				-тэ	
Resolution Trust Corpor	cation, Receiv	er for			
City Federal Savings & Loan	Association			20	
2030 Second Avenue N.					
Birmingham, Al. 35203					
2B.					
		-20-	- 11000		
This Additional Sheet covers the following 4 delitional Types (a			75 BU		
 This Additional Sheet covers the following Additional Types (or 	r items) of Property:	,			
			54	L. Collateral Code:	
					
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			t common Ain	- Receiver f	- —
		City Federal Sa	A COMPANY LO		n
Signature(s) of Debtor(s)		Signatur (s) 4 Estarred Pa			
Signature(s) of Debtor(s)		BY: Signature(s) of Secured Par	rty(ips) or Assigned T 1	A	
orginatore(s) or Debiot(s)		Janaiore(s) or secored Par	TCS	Attorney-in-	ract
Type Name of Individual or Business	COOV ADVIOUS EDECT	Type Name of Individual or		44 9' LINE	00.5
1) FILING OFFICER COPY — ALPHABETICAL (3) FILING OFFICER 2) FILING OFFICER COPY — NUMERICAL (4) FILE COPY — SI	R COPY — ACKNOWLEDGEMENT ECOND PARTY(S) (8	STAN 5) FILE COPY DEBTOR(S)	NDARD FORM — UNIFORM CO Approved by The Secre	MMERCIAL CODE — FORM U tary of State of Alabama	CC-E