

1. 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

Pre-paid Acct. #

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

Joiner Jason
P.O. Box 86
Shelby, Al. 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

Social Security/Tax ID #

☒ Additional debtors on attached UCC-E

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

RESOLUTION TRUST CORPORATION, RECEIVER
FOR CITY FEDERAL SAVINGS AND LOAN ASSOCIATION
2030 SECOND AVENUE, NORTH
BIRMINGHAM, AL 35203

Social Security/Tax ID #

☐ Additional secured parties on attached UCC-E

5. ☒ This statement refers to original Financing Statement bearing File No. 017452

Filed with Shelby Co.

Date Filed June 22, 19 87

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. 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

Assignment. 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.

11

Assignee: Magnolia Federal Bank For Savings

4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)

c/o ROSE DISCOUNT MOBILE HOMES, INC.
ATTN: MR. TOMMY ROSE
ROUTE 1, BOX 185-B
HICKORY, MS 39332

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

11.00 + 1.00 = 12.00

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

RESOLUTION TRUST CORPORATION, RECEIVER FOR
CITY FEDERAL SAVINGS AND LOAN ASSOCIATION

BY:

ITS ATTORNEY - IN - FACT

Type Name of Individual or Business

(1) FILING OFFICER COPY - ALPHABETICAL
(2) FILING OFFICER COPY - NUMERICAL

(3) FILING OFFICER COPY - ACKNOWLEDGEMENT
(4) FILE COPY SECOND PARTY(S)

(5) FILE COPY DEBTOR(S)

STANDARD FORM - UNIFORM COMMERCIAL CODE - FORM UCC-3
Approved by The Secretary of State of Alabama

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

Joiner, Otha
P.O. Box 86
Shelby, Al. 35143

Social Security/Tax ID # _____

1A. Name and Address of Debtor (IF ANY) (Last Name First if a Person)

Joiner, Eloise
P.O. Box 86
Shelby, Al. 35143

Social Security/Tax ID # _____

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

Resolution Trust Corporation, Receiver for
City Federal Savings & Loan Association
2030 Second Avenue N.
Birmingham, Al. 35203

2B.

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

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5. This Additional Sheet covers the following Additional Types (or items) of Property:

5A. Collateral Code:

Signature(s) of Debtor(s)

Signature(s) of Debtor(s)

Type Name of Individual or Business

Resolution Trust Corporation, Receiver for
City Federal Savings and Loan AssociationBY: *[Signature]*

Signature(s) of Secured Party(ies) or Assignee

Its Attorney-in-Fact

Type Name of Individual or Business

Richard S. Feltz(1) FILING OFFICER COPY — ALPHABETICAL
(2) FILING OFFICER COPY — NUMERICAL(3) FILING OFFICER COPY — ACKNOWLEDGEMENT
(4) FILE COPY — SECOND PARTY(S)

(5) FILE COPY DEBTOR(S)

STANDARD FORM — UNIFORM COMMERCIAL CODE — FORM UCC-E
Approved by The Secretary of State of Alabama