

1. Return copy or recorded original to
LANGE, SIMPSON, ROBINSON & SOMERVILLE
1700 FIRST ALABAMA BANK BUILDING
BIRMINGHAM, AL 35203
ATTN: MR. RICHARD TISHLER

Pre-paid Acct. # _____

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

2. Name and Address of Debtor (Last Name First if a Person)
Carver, Robert
Rt. 1 box 91 B
Chelsea, Al. 35043

Social Security/Tax ID # _____

2A. Name and Address of Debtor (IF ANY) (Last Name First if a Person)
Carver, Teresa H.
Rt.1 Box 91 B
Chelsea, Al. 35043

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

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

5. ☒ This statement refers to original Financing Statement bearing File No. _____
Filed with **Shelby Co.**

015922
Date Filed **Jan 12** 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 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.

39 4254

11. **9.00**

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 _____

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

BY: **Nelson B. Taylor**
IT'S ATTORNEY - IN - FACT
Nelson B. Taylor

Type Name of Individual or Business _____