☐ 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.
Return copy or recorded original to	- Critation - Contraction	THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office
LANGE, SIMPSON, ROBINSON & SO 1700 FIRST ALABAMA BANK BUIL BIRMINGHAM, AL 35203 ATTN: MR. RICHARD TISHLER		
Pre-paid Acct. #	(Last Name First if a Person	
Morrison, Suzanne Rt. 5 Box 705 Montevallo, Alabama 35115		190 HE61
Social Security/Tax ID #		<u></u> ω
Webster, Angela Rene' Rt. 5 Box 705 Montevallo, Alabama 35115		PH 2: Q4
Social Security/Tax ID #	<u>-</u>	
☐ Additional debtors on attached UCC-E		
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 FOR CITY FEDERAL SAVINGS AND LOAN ASSOCIATION 2030 SECOND AVENUE, NORTH BIRMINGHAM, AL 35203 Social Security/Tax ID #		A ASSIGNEE OF SECURED PARTY Magnolia Federal Bank For Savings C/OROSE DISCOUNT MUBILE HOMES, INC. ATTN: MR. TOMMY ROSE ROUTE 1, BOX 185-B HICKORY, MS 39332
☐ Additional secured parties on attached UCC-E		
5. XIXThis statement refers to original Financing Statement bearing File No. 021170 Filed withShelby County		Date Filed September 22 19 88
7. Termination. Secured Party no longer claims 8. Partial or The Secured Party's right under property described in item 11 or Assignment. Whose name and address appears to Partial Secured Party releases the colla number shown above.	a security interest under the financing state the financing statement bearing file number to all of the property listed on this file, is as	orth in item 11.
11.		11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filling:
Check X if covered: Products of Collateral are a Signature(s) of Debtor(s)	also covered.	RESOLUTION / HUST CORPORIZITION, HECEIVER FOR CITY/EFFICER AL/CAYINGS/AND LOAN ASSOCIATION Signature (s)/of Sector of Arty(ied)
Signature(s) of Debtor(s) (necessary only if item	9 is applicable)	BY: HIS APTURNEY - IN - FACT
Type Name of Individual or Business		Type Name of Individual or Business Richard S. Fleisig
(A) PHILLIA APPLACE ASPL. A. M. ASSESSOR ST. CO. TO THE		ATTURADO FORMA ANAFORMA COM MARCONA CARRA FACALADA A