

1 Return copy or recorded original to

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

LEADER FEDERAL BANK FOR SAVINGS
P.O. BOX 275
MEMPHIS, TN 38101-0275

3-31644-19

Pre-paid Acct. # _____

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

FENLEY, THOMAS F.
P.O. BOX 412
ALABASTER, AL 35007

Social Security/Tax ID # _____

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

FENLEY, FRANCIS
P.O. BOX 412
ALABASTER, AL 35007

Social Security/Tax ID # _____

☐ Additional debtors on attached UCC-E

3 SECURED PARTY (Last Name First if a Person)

LEADER FEDERAL BANK FOR SAVINGS
P.O. BOX 275
MEMPHIS, TN 38101-0275

Social Security/Tax ID # _____

☐ Additional secured parties on attached UCC-E

5 ☐ This statement refers to original Financing Statement bearing File No. 018433

Filed with SHELBY COUNTY

Date Filed OCTOBER 28 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 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.

9.00

11.

PLEASE AMEND TO REFLECT CORRECTED PROPERTY DESCRIPTION:

1988 FLEETWOOD WESTFIELD, 14X56, SERIAL# GAFLH07A14975WF

THIS FINANCING STATEMENT SHALL REMAIN EFFECTIVE
UNTIL A TERMINATION STATEMENT IS FILED.

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)

Signature(s) of Secured Party(ies)

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