STATE OF ALABAMA — UNIFORM COMMERCIAL CODE STATEMENTS OF CONTINUATION, PARTIAL RELEASE, ASSIGNMENT, ETC. — FORM UCC-3

Important: Read Instructions on Back Before Filling out Form.

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 Fiting Officer for filing pursuant to the Uniform Commercial Code.	
Return copy or recorded original to	•	THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	· · · · · · · · · · · · · · · · · · ·
First National Bank o p O Box 977 Columbiana, Al 35051	f Columbiana		
Pre-paid Acct. #	(Last Name First if a Perso	 On)	
Hicks. James Rt 1 Box 205 Wilsonville,, Al 3518			24542 GF 71 T T TED 9.8
Social Security/Tax ID #	(Las Name First if a Person	on)	10/28/1992 10/28/1992 12:55 PM CE 12:55 PM CE
Social Security/Tax ID #			
Additional debtors on attached UCC-E			
First National Bank of 0 Box 977 Columbiana, Al 35051	f Columbiana	4. ASSIGNEE OF SECURED PARTY	(IF ANY) (Last Name First If a Person)
Social Security/Tax ID #			
Additional secured parties on attached UCC-E			
5. This statement refers to original Financing Sta	tement bearing File No. 017343	Juno 15	1987
Filed with Sheebby County Juc	ige of Probate	Date Filed June 15,	1907 19
7. Permination. Secured Party no longer clair 8. Partial or The Secured Party's right und property described in Item 11 Assignment. whose name and address ap 9. Amendment Financing statement bearing	the financing statement bearing file number the financing statement bearing file number to all of the property listed on this file, is pears in item 4. file number shown above is amended as septimeteral described in item 11 from the finance.	ber shown above to the assignee forth in item 11.	11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Fiting:
Check X if covered: Products of Collateral at	re also covered.		
Signature(s) of Debtor(s)		Fix st National Bank Sibility (1) of Secure of Party lies	of Columbiana INHIIA
Signature(s) of Debtor(s) (necessary only if ite	m 9 is applicable)	Signature(s) of Sequred Party(ies)	umy)
Type Name of Individual or Business		Type Name of Individual or Business	<u> </u>
(1) FILING OFFICER COPY - ALPHABETICAL (3) FI	LING OFFICER COPY ACKNOWLEDGEMEN LE COPY SECOND PARTY(S)	T STANDARD FOR	M — UNIFORM COMMERCIAL CODE — FORM UCC-3 roved by The Secretary of State of Alabama