

**Important: Read Instructions on Back Before Filling out Form.**

REORDER FROM  
**Registree, Inc.**  
514 PIERCE ST.  
P.O. BOX 218  
ANOKE, MN. 55303  
(612) 421-1713

<input type="checkbox"/> 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.
1. Return copy or recorded original to <div style="text-align: center; font-size: 1.2em; font-weight: bold;">87-39155234</div> <div style="text-align: center;"> <b>MAGNOLIA FEDERAL BANK FOR SAVINGS</b>            P.O. Box 1858            Hattiesburg, MS 39403-1858         </div>		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office
Pre-paid Acct. # _____ 2. Name and Address of Debtor (Last Name First if a Person)  <div style="text-align: center;">           Sanders, Locky            Rt. 1 Box 560            Vincent, AL 35178         </div>		<div style="writing-mode: vertical-rl; transform: rotate(180deg);">             Inst # 1993-10603               04/19/1993-10603              08:35 AM CERTIFIED              SHELBY COUNTY JUDGE OF PROBATE              001 HCD 13.00           </div>
Social Security/Tax ID # _____ 2A. Name and Address of Debtor (IF ANY) (Last Name First if a Person)		
Social Security/Tax ID # _____ 4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)		
3. NAME AND ADDRESS OF SECURED PARTY (Last Name First if a Person)  <div style="text-align: center;"> <b>MAGNOLIA FEDERAL BANK FOR SAVINGS</b>            P.O. Box 1858            Hattiesburg, MS 39403-1858         </div>		
<input type="checkbox"/> Additional debtors on attached UCC-E 5. <input type="checkbox"/> This statement refers to original Financing Statement bearing File No. <u>019938</u> Filed with <u>Shelby Co.</u>		FILED WITH:  Date Filed <u>May 3</u> 19 <u>88</u>
<input type="checkbox"/> Additional secured parties on attached UCC-E 6. <input checked="" type="checkbox"/> Continuation. The original financing statement between the foregoing Debtor and Secured Party, bearing file number shown above, is still effective. 7. <input type="checkbox"/> Termination. Secured Party no longer claims a security interest under the financing statement bearing the file number shown above. 8. <input type="checkbox"/> Partial or 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. <input type="checkbox"/> Amendment. Financing statement bearing file number shown above is amended as set forth in item 11. 10. <input type="checkbox"/> Partial Release. Secured Party releases the collateral described in item 11 from the financing statement bearing file number shown above.		
11.		11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing:  <div style="display: flex; justify-content: space-between;"> <div>             _____              _____              _____              _____              _____              _____              _____           </div> <div>             _____              _____              _____              _____              _____              _____              _____           </div> </div>
Check X if covered: <input type="checkbox"/> Products of Collateral are also covered.		

MAGNOLIA FEDERAL BANK FOR SAVINGS.

**Signature(s) of Debtor(s)**

Signature(s) of Debtor(s) (necessary only if item 9 is applicable)

Type Name of individual or Business

~~Signature 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 - SECURED

(5) FILE COPY DEBTOR(S)

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