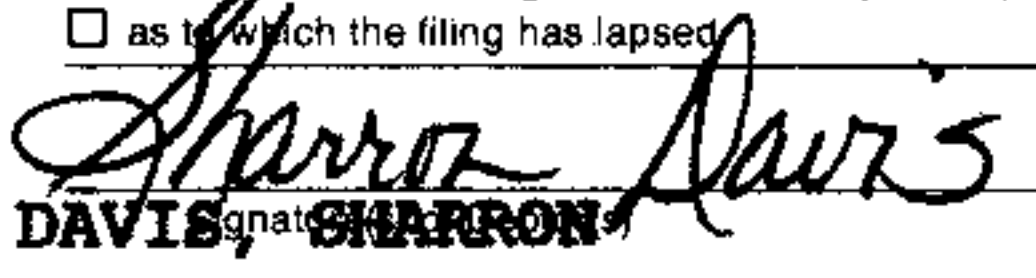
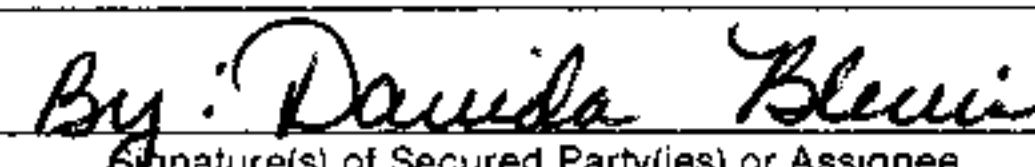


# STATE OF ALABAMA — UNIFORM COMMERCIAL CODE — FINANCING STATEMENT FORM UCC-1 ALA.

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

REORDER FROM  
**Registre, Inc.**  
514 PIERCE ST.  
P.O. BOX 218  
ANOKA, 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:  <b>GREEN TREE FINANCIAL CORP.</b> <b>P.O. BOX 3317</b> <b>324 INTERSTATE PARK DRIVE</b> <b>MONTGOMERY AL 36109</b>  Pre-paid Acct. # _____		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office  <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="writing-mode: vertical-rl; transform: rotate(180deg);">Inst # 1993-16621</div> <div style="writing-mode: vertical-rl; transform: rotate(180deg);">06/09/1993-16621 10:38 AM CERTIFIED SHELBY COUNTY JUDGE OF PROBATE 001 MCD 40.30</div> </div>
2. Name and Address of Debtor (Last Name First if a Person)  <b>DAVIS, SHARRON</b> <b>315 MCGRAW RD</b>  <b>VINCENT AL 35178</b>  Social Security / Tax ID # _____		
2A. Name and Address of Debtor (IF ANY) (Last Name First if a Person)  Social Security / Tax ID # _____		
<input type="checkbox"/> Additional debtors on attached UCC-E		
3. NAME AND ADDRESS OF SECURED PARTY (Last Name First if a Person)  <b>GREEN TREE FINANCIAL CORP.</b> <b>P.O. BOX 3317</b> <b>324 INTERSTATE PARK DRIVE</b> <b>MONTGOMERY AL 36109</b>  Social Security / Tax ID # _____		4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)  <b>GREEN TREE FINANCIAL CORP.</b> <b>P.O. BOX 3317</b> <b>324 INTERSTATE PARK DRIVE</b> <b>MONTGOMERY AL 36109</b>
<input type="checkbox"/> Additional secured parties on attached UCC-E		FILED WITH:
5. The Financing Statement Covers the Following Types (or items) of Property:  <b>SERIAL# DSHAL8287 AB</b> <b>1987 SO HOSPITALITY 24 X 56</b> <b>AND INCLUDING ALL FURNITURE, FIXTURES, APPLIANCES AND APPURTENANCES</b> <b>THEREIN AND THERETO; INCLUDING BUT NOT LIMITED TO THOSE ITEMS SPECIFIED</b> <b>ON THE MANUFACTURERS INVOICE AND/OR PURCHASE AGREEMENT AND/OR RETAIL</b> <b>INSTALLMENT CONTRACT OR INSTALLMENT LOAN AGREEMENT. THIS FINANCING</b> <b>STATEMENT DOES NOT APPLY TO NONPURCHASE MONEY HOUSEHOLD GOODS AS DEFINED</b> <b>AT 16 CFR 444.(i) OR THE STATE LAW EQUIVALENT STATUTE. THIS FINANCING</b> <b>STATEMENT COVERS A MOBILE HOME WHICH DOES NOT CONSTITUTE INVENTORY</b> <b>AND REMAINS IN EFFECT UNTIL A TERMINATION STATEMENT IS FILED.</b>		
Check X if covered <input checked="" type="checkbox"/> Products of Collateral are also covered.		
6. This statement is filed without the debtor's signature to perfect a security interest in collateral (check X, if so) <input type="checkbox"/> already subject to a security interest in another jurisdiction when it was brought into this state. <input type="checkbox"/> already subject to a security interest in another jurisdiction when debtor's location changed to this state. <input type="checkbox"/> which is proceeds of the original collateral described above in which a security interest is perfected. <input type="checkbox"/> acquired after a change of name, identity or corporate structure of debtor <input type="checkbox"/> as to which the filing has lapsed		7. Complete only when filing with the Judge of Probate: The initial indebtedness secured by this financing statement is \$ <b>18178.43</b> Mortgage tax due (15¢ per \$100.00 or fraction thereof) \$ <b>.00</b>  8. <input type="checkbox"/> This financing statement covers timber to be cut, crops, or fixtures and is to be cross indexed in the real estate mortgage records (Describe real estate and if debtor does not have an interest of record, give name of record owner in Box 5)
Signature(s) of Debtor(s)  <b>DAVIS, SHARRON</b>		Signature(s) of Secured Party(ies) (Required only if filed without debtor's Signature — see Box 6) By:  Signature(s) of Secured Party(ies) or Assignee <b>GREEN TREE FINANCIAL CORP., P.O. BOX 3317,</b> Type Name of Individual or Business