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.

REORDER FROM

Registré, Inc.
514 PIERCE ST.
P.O. BOX 218
ANOKA, MN. 55303
(612) 421-1713

| ☐ The Debtor is a transmitting utility | No. of Additional | This FINANCING STATEMENT is presented | to a Fifing Officer for |
|---|---|---|--|
| as defined in ALA CODE 7-9-105(n). | Sheets Presented: | filing pursuant to the Uniform Commercial C | Code. |
| Return copy or recorded original to | | Date, Time, Number & Filing Office | |
| Security Pacific Fina | incial Services, | | |
| A Division of Bank of America, FSB | | | g A |
| P.O. Box 385000 | | | 의 설범별 |
| Birmingham, Al 35238 | | | |
| | | | 7 0 1 2 |
| | | | |
| Pre-paid Acct. # 2. Name and Address of Debtor | (Last Name First if a Person) | , | 0. 多世麗 |
| 2. Name and Address of Debtor | (Lest Herris 1 Herris at 1 0 000) | | 4 6 5 3 × |
| ates, Ginni | | | コンドラ |
| 5 Houston Dr. | | | |
| Alabaster, Al 35007 | | | + 60 a = 8 |
| Tabascer, Hr 2200, | | 1 | |
| The There County | | | |
| Shelby County | | | |
| Social Security/Tax ID # | ANY) (Last Name First if a Person) |) | And the second s |
| | | | |
| Cates, Robbie | | | <u>'2</u> |
| 25 Houston Dr. | | | |
| Alabaster, Al 35007 | | | • |
| | | | |
| | | | |
| Social Security/Tax ID # | | FILED WITH: | ······································ |
| ☐ Additional debtors on attached UCC-E | | | |
| 3. NAME AND ADDRESS OF SECURED PART | V) (Last Name First if a Person) | 4. ASSIGNEE OF SECURED PARTY (IF A | ANY) (Last Name First if a Person) |
| 3. NAME AND ADDRESS OF SECURED FART | T) (East realite 1 list ii a 1 bloom) | , | |
| Jefferson Federal Sa | vings | | |
| and Loan Association | | | |
| 215 N. 21st Street | | | |
| Birmingham, Al 35238 | . | | |
| Social Security/Tax ID # | | | |
| ☐ Additional secured parties on attached UCC-E | | | |
| | | | |
| 5. This statement refers to original Financing | Statement bearing the No. | 21298 Oct 11 | 88 |
| Filed with Shelby Coun | · · · · · · · · · · · · · · · · · · · | Date Filed | |
| 7. Termination. Secured Party no longer cla 8. Partial or The Secured Party's right u Full property described in item 1 Assignment, whose name and address a 9xxxxx Amendment Financing statement bearing | aims a security interest under the financing state inder the financing statement bearing file numb 11 or to all of the property listed on this file, is a | er shown above to the ssigned to the assigned forth in item 11. | |
| 11. | | | |
| | | | 11A. Enter Code(s) From Back of Form That |
| This financing state | ment covers a mob | ile home | Best Describes The Collateral Covered |
| which does not const | itute inventory a | nd remains | By This Filing: |
| effective until a te | ermination stateme | nt is filed. | 103 |
| CIICOLIVO LIVIOLE | | | 6 <u>02</u> |
| Maturity Date: 10/ | /15/03 Account | # 5320003990 | |
| Maturity Date. 10/ | 13/03 | • | |
| | | | |
| | | | |
| | | | |
| Check X if covered: Products of Collateral | are also covered. | | |
| | | · · · · · · · · · · · · · · · · · · · | |
| | | Signature(s) of Secured Party(ies) | 20 - |
| Signature(s) of Debtor(s) | | aignature(s) of accured Party(les) | Maron Pate |
| Signature(s) of Debtor(s) (necessary only if | item 9 is applicable) | Signature(s) of Secured Party(ies) | Savings & Loan Assoc |
| | | | |
| Type Name of Individual or Business | | Type Name of Individual or Business | |