

INSTRUCTIONS:

1. PLEASE TYPE ALL INFORMATION, and sign with ball point pen. Signature must be legible on Filing Officer Copies.
2. Contact Filing Officer for fee schedule or additional information.

P.O. BOX 2531 • TALLAHASSEE 32304
PHONE 904-224-0040

627921-3

STATE OF FLORIDA ~~ALABAMA~~

UNIFORM COMMERCIAL CODE — FINANCING STATEMENT — FORM UCC-1 REV. 1981

THIS FINANCING STATEMENT is presented to a filing officer for filing pursuant to the Uniform Commercial Code.

ONLY ONE NAME PER BOX

DEBTOR (Last Name First if a Person)

NAME Steven R Bunn

THIS SPACE FOR USE OF FILING OFFICER

Date, Time, Number & Filing Office

1A

MAILING ADDRESS 3014 Vance Street

CITY Pelham

STATE AL 35124

MULTIPLE DEBTOR (IF ANY) (Last Name First if a Person)

NAME

1B

MAILING ADDRESS

CITY

STATE

MULTIPLE DEBTOR (IF ANY) (Last Name First if a Person)

NAME

1C

MAILING ADDRESS

CITY

STATE

SECURED PARTY (Last Name First if a Person)

NAME Telco of Florida FCU

2A

MAILING ADDRESS P O Box 17508

CITY Pensacola

STATE FL 32522

MULTIPLE SECURED PARTY (IF ANY) (Last Name First if a Person)

NAME

2B

MAILING ADDRESS

CITY

STATE

ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)

NAME

3

MAILING ADDRESS

CITY

STATE

4. This FINANCING STATEMENT covers the following types or items of property (include description of real property on which located and owner of record when required). If more space is required, attach additional sheets 8 1/2" x 11"

1984 Catalina 21 6 ' Sail Boat CTYH2627M84K

5. Proceeds of collateral are covered as provided in Sections 679.203 and 679.308, F.S.

7. No. of additional Sheets presented:

6. Filed with:

8. (Check ☐) ☐ All documentary stamp taxes due and payable or to become due and payable pursuant to Section 201.22, F.S., have been paid.

☐ Florida Documentary Stamp Tax is not required.

9. This statement is filed without the debtor's signature to perfect a security interest in collateral (Check ☐ if so)

☐ already subject to a security interest in another jurisdiction when it was brought into this state or debtor's location changed to this state.

☐ which is proceeds of the original collateral described above in which a security interest was perfected.

☐ as to which the filing has lapsed.

☐ acquired after a change of name, identity, or corporate structure of the

☐ debtor or ☐ secured party.

10. (Check ☐ if so)

☐ Debtor is a transmitting utility

☐ Products of collateral are covered

11. SIGNATURE(S) OF DEBTOR(S)

[Signature]

SIGNATURE(S) OF SECURED PARTY(IES) OR ASSIGNEE

[Signature]

13. Return copy to:

NAME	Telco of Florida FCU		
ADDRESS	P O Box 17508		
CITY	Pensacola		
STATE	Florida	ZIP CODE	32522

NAME AND ADDRESS OF PREPARER