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

614 PIERCE ST.

P.D. BOX 218

FNOKA MM. 56403

☐ The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n).	No. of Additional Sheets Presented:	This FINANCING STATEMENT is pre- filing pursuant to the Uniform Comme	sented to a Filing Officer for ercial Code.
Return copy or recorded original to		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	
LUCAS, JEFFERY S.			
P.O. BOX 103#			
MONTEVALLO, AL 35115			
Pre-paid Acct. #	(Last Name First if a Person)		O O H
LUCAS, PAMELA G.			on the s
LUCAS, PAMELA G.			
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			ころを言う
Social Security/Tax ID #			
2A. Name and Address of Debtor (IF ANY)	(Last Name First if a Person)		
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		,	
			: . ·
Social Security/Tax ID #		FILED WITH:	3
☐ Additional debtors on attached UCC-E			
3. NAME AND ADDRESS OF SECURED PARTY) (Last N CITICORP NATIONAL SERVICES	lame First if a Person)	4. ASSIGNEE OF SECURED PARTY	(IF ANY) (Last Name First if a Person)
formally known as;	, INC		
CITICORP ACCEPTANCE CO. IN	С.		-1 :
P.O. BOX 790142			
ST. LOUIS, MO .63179			
Social Security/Tax ID #			
Additional secured parties on attached UCC-E	at bearing File No. 01912	22	
5. This statement refers to original Financing Statement SHELBY COUNTY	III OBAHING FINE INC.	Date Filed 1 - 25	19_88_
Full property described in item 11 or to a Assignment. whose name and address appears in 9. Amendment Financing statement bearing file num 10. Partial Secured Party releases the collateral number shown above.	curity interest under the financing stateme financing statement bearing file number s Il of the property listed on this file, is assign item 4.	ant bearing the file number shown above. shown above to the sessignee in item 11.	ective
11.			11A. Enter Code(s) From
008-584631			Back of Form That Best Describes The
			Collateral Covered By This Fiting:
			600602
			
	·		
			
			
Check X if covered: Products of Collateral are also	covered.		
	-	CITICORP NATIONA	L SERVICES, INC
Signature(s) of Debtor(s)		Signature(s) of Secured Party(ies)	Parll.
Signature(s) of Debtor(s) (necessary only if item 9 is	applicable)	Signature(s) of Secured Party(ies)	rucky
Tune Name of Individual or Our!		Tuno filamo of Individual or Decisions	<u> </u>
Type Name of Individual or Business (1) SHING OFFICER CORY, ALCHARETICAL (2) SHING OFFI	FICER CORY ACKNOWI EDGEMENT	Type Name of Individual or Business STANDARD FO	RM — UNIFORM COMMERCIAL CODE — FORM UCC-3