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 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.		
Return copy or recorded original to		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office		· • · · · · · · · · · · · · · · · · · ·
CENTRAL STATE BANK P.O. BOX 180 CALERA, AL 35040				
Pre-paid Acct. #	_			a
2. Name and Address of Debtor .	(Last Name First if a Person)		rut.	4 min
MARK SEALE			i c	STEE S
686 SEALE ROAD			7	
CALERA, AL 35040			466	の過
Social Security/Tax ID #				\ <u></u>
2A. Name and Address of Debtor (IF AN	(Last Name First if a Person)			07*20
Social Security/Tax IO #	·····			· ·
☐ Additional debtors on attached UCC-E				
3. SECURED PARTY (Last Name First if a Person)		4. ASSIGNEE OF SECURED PARTY	(IF ANY) (L	ast Name First if a Person)
CENTRAL ST Highway 25 Highway 25 Calera, Alab Social Security/Tax ID #				
	estament hooring Eile No	1992-13381		
5. XXThis statement refers to original Financing Statement bearing File No. Filed with SHELBY COUNTY JUDGE OF PROBATE		Date Filed 07/08/92 19		
8. Partial or The Secured Party's right under Described in item 11 of Describ	is a security interest under the financing stateme er the financing statement bearing file number s or to all of the property listed on this file, is assig	ent bearing the file number shown above. shown above to the gned to the assignee. It in item 11.	effective.	
MURRAY TRACTOR VIN 687	7161M		E	Enter Code(s) From Back of Form That
POULAN TRIMMER #1G3316617			E (Best Describes The Collateral Covered By This Filling:
GREEN MACHINE BLOWER VAC #040527			-	., mainig.
			-	
			_	
			-	
			_	
Check X if covered: Products of Collateral are	e also covered.			
		1/1/h. /r		: /
Signature(s) of Debtor(s)	· ·	Signature(s) of Secured Party(les) CENTRAL STATE	BANK	
Signature(s) of Debtor(s) (necessary only if iter	Signature(s) of Secured Party(ies)			
Type Name of Individual or Business		Type Name of Individual or Busine	985	
	ING OFFICER COPY ACKNOWLEDGEMENT E COPY SECOND PARTY(S)	_	FORM — UNIFORM COMM! Approved by The Secretary	ERCIAL CODE — FORM UCC-3 of State of Alabama