

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

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

REORDER FROM  
**Register, 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:  <div style="text-align: center;"> <b>NationsCredit Commercial Corp.</b>  <b>P. O. BOX 460229</b>  <b>ATLANTA, GA 30348-0229</b> </div>		<div style="writing-mode: vertical-rl; transform: rotate(180deg);">             THIS SPACE FOR USE OF FILING OFFICER              Date, Time, Number &amp; Filing Office   <div style="font-size: 2em; font-weight: bold;"># 1994-12706</div> <div style="font-size: 1.5em; font-weight: bold;">04/18/1994-12706</div> <div style="font-size: 1.2em; font-weight: bold;">04:07 PM CERTIFIED</div> <div style="font-size: 1.2em; font-weight: bold;">SHELBY COUNTY JUDGE OF PROBATE</div> <div style="font-size: 1.2em; font-weight: bold;">001 MCD 39.45</div> </div>
2. Name and Address of Debtor (Last Name First if a Person)  <b>BRIGGS, TROY F.</b>  <b>1429 TIMBER CIR.</b> <b>HELENA AL 35080</b> <b>SHELBY COUNTY, AL</b>  Social Security / Tax ID # _____		
2A. Name and Address of Debtor (IF ANY) (Last Name First if a Person)  <div style="text-align: center; font-size: 1.5em; font-weight: bold;">MATURITY DATE <u>4-13-99</u></div>		
Social Security / Tax ID # _____		
<input type="checkbox"/> Additional debtors on attached UCC-E		FILED WITH: _____
3. NAME AND ADDRESS OF SECURED PARTY (Last Name First if a Person)  <b>MALCOM MARINE INC</b> <b>532 GILBERTS FERRY RD</b> <b>ATTALIA AL 35954</b>  Social Security / Tax ID # _____		4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)  <b>NATIONSCREDIT</b> <b>7000 CENTRAL PKWY SUITE 1400</b> <b>ATLANTA GA 30328</b>
<input type="checkbox"/> Additional secured parties on attached UCC-E		

5. The Financing Statement Covers the Following Types (or Items) of Property:

- (1) NEW 1994 MARIAH 182 BARCHETTA ID# MAB06154C494
- (1) 4.3LX MERCURISER ID# 0F276289
- (1) HERITAGE #4APBT1815R1000369

5A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing:

6 0 0

Check X if covered: ☐ 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)
- ☐ already subject to a security interest in another jurisdiction when it was brought into this state.
  - ☐ already subject to a security interest in another jurisdiction when debtor's location changed to this state.
  - ☐ which is proceeds of the original collateral described above in which a security interest is perfected.
  - ☐ acquired after a change of name, identity or corporate structure of debtor
  - ☐ 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 \$ <u>16254.33</u> Mortgage tax due (15% per \$100.00 or fraction thereof) \$ <u>24.45</u>
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)

**X** \_\_\_\_\_  
Signature(s) of Debtor(s)

Signature(s) of Debtor(s)

Type Name of Individual or Business

\_\_\_\_\_  
Signature(s) of Secured Party(ies) or Assignee

Signature(s) of Secured Party(ies) or Assignee

**MALCOM MARINE INC**

Type Name of Individual or Business