## 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. Registre. Inc. 514 PLERCE ST. P.O. BOX 218 ANOKA, MN. 55303 (612) #21-1713

☐ The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n).  No. of Additional Sheets Preserved.	The state of the s
Return copy or recorded original to	THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office
CENTRAL STATE BANK	Sale, Time, Harrist at lang office
P.O. BOX 180	
CALERA, AL 35040	
Pre-paid Acct. #	
2. Name and Address of Debtor (Last N	ame First if a Person)
REGINA L BURNETT	
JAMES C BURNETT	
ROUTE 1, BOX 522	
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Social Security/Tax ID #	
	ame First if a Person)
Social Security/Tax ID #	ď
☐ Additional debtors on attached UCC-E	
3. SECURED PARTY (Last Name First if a Person)	4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)
OFNITO AL CTATE DANK	
CENTRAL STATE BANK Highway 25 P.O. Boy 180	
Highway 25 P.O. Box 180 Calera, Alabama 35040	
•	,
Social Security/Tax ID #	
☐ Additional secured parties on attached UCC-E	
5.XX This statement refers to original Financing Statement bearing File No	
Filed with Shelby County Judge of Pr	obate Date Filed July 20 19 89
7. Partial or The Secured Party no longer claims a security interest und The Secured Party's right under the financing statement property described in item 11 or to all of the property I whose name and address appears in item 4.  9. Amendment Financing statement bearing file number shown above Secured Party releases the collateral described in item number shown above.	nt bearing file number shown above to the sted on this file, is assigned to the assignee is amended as set forth in item 11.
11.	
1987 14 X 70 BUCANNEER MOBILE HON	IE SERIAL NUMBER #7875  11A. Enter Code(s) From Back of Form That
	Best Describes The Collateral Covered
-	By This Filing:
Check X if covered: Products of Collateral are also covered.	
•	//wh////
Signature(s) of Debtor(s)	Signature(s) of Secured Party(ies) CENTRAL STATE BANK
Signature(s) of Debtor(s) (necessary only if item 9 is applicable)	Signature(s) of Secured Party(ies)
<u> </u>	
Type Name of Individual or Business  (1) FILING OFFICER COPY — ALPHABETICAL (3) FILING OFFICER COPY — A	Type Name of Individual or Business  CKNOWLEDGEMENT STANDARD FORM — UNIFORM COMMERCIAL CODE — FORM UCC-3

Approved by The Secretary of State of Alabama