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
ANGKA, MN. 95303
(612) 421-1713

| ☐ The Debtor is a transmitting utility | No. of Additional | This FINANCING STATEMENT is presented to the Uniform Commercial C | to a Filing Officer for |
|---|--|--|--|
| as defined in ALA CODE 7-9-105(n). | Sheets Presented: | THIS SPACE FOR USE OF FILING OFFICER | |
| Return copy or recorded original to | | Date, Time, Number & Filing Office | |
| SECURITY PACIFIC HOU | USING SERVICES, | | |
| DIVISION OF BANK OF | AMERICA, FSB | | e e e e e e e e e e e e e e e e e e e |
| P.O. BOX 385000 | | <u>-</u> | |
| BIRMINGHAM, AL 35238 | | 是 工作量 。 | |
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| | | | |
| Pre-paid Acct. # Name and Address of Debtor | (Last Name First if a Person) | | 大 |
| STOREY, CLIFFORD L. | (Last Harris I hat it a l'electry | | |
| 122 THISTLE LANE | | | 光 美麗皇 |
| | | | n 8 = |
| CALERA, AL 35040 | | | |
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| | | | |
| Social Security/Tax ID #(IF AN Name and Address of Debtor | (Last Name First if a Person) | -··- <mark>-</mark> | |
| A. Name and Address of Debtor (IF AN | (Last Hame) list ii a 1 st soon) | | |
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| | | · | ···· |
| Social Security/Tax ID # | | FILED WITH: | • |
| Additional debtors on attached UCC-E | | | |
| NAME AND ADDRESS OF SECURED PARTY) (| (Last Name First if a Person) | 4. ASSIGNEE OF SECURED PARTY (IF A | (NY) (Last Name First if a Person) |
| Social Security/Tax ID # | · · · · · · · · · · · · · · · · · · · | | |
| Additional secured parties on attached UCC-E | <u> </u> | | |
| 5. This statement refers to original Financing St | tatement bearing File No023900 | | <u> </u> |
| Filed withSHRLBY | | Date Filed9/22/89 - | 19 |
| 7. Termination. Secured Party no longer claim 8. Partial or The Secured Party's right und Full property described in item 11 and address app 9. Modernett Financing statement bearing for | ns a security interest under the financing states ler the financing statement bearing file numbe or to all of the property listed on this file, is as: | r shown above to the signed to the assigned to the assigned orth in item 11. | 25.00 |
| 11. | | | |
| (1) 1981 SUNSHINE 14X70 S/N 11615 | | | 11A. Enter Code(s) From Back of Form That |
| | | | Best Describes The |
| THIS FINANCING STATE | EMENT COVERS A MOBILE | HOME WHICH | Collateral Covered By This Filing: |
| DOES NOT CONSTITUE I | INVENTORY AND REMAINS | S EFFECTIVE | <u> </u> |
| UNTIL A TERMINATION | STATEMENT IS FILED. | | |
| | | XXXXXXX | 103 |
| ACCOUNT# 5320004 | 4738 × | ATURITY DATE: 10/1/04 | 602 |
| TOUGHT SECONS | | | |
| | | | <u> </u> |
| | | | |
| Check X if covered: Products of Collateral ar | re also covered. | | |
| Check Air covered: Li Products of Collateral ar | 235 0010100 | | |
| | · · · · · · · · · · · · · · · · · · · | / | |
| Signature(s) of Debtor(s) | | Signature(s) of Secured Party(ies) | |
| Disease water of Disease (a) to a consequence to 24 the | am Q is anninghiel | Signature(s) of Secured Partyles) | |
| Signature(s) of Debtor(s) (necessary only if ite | siti a is applicable) | JEFFERSON FEDERAL S | &L ASSOC. |
| Type Name of Individual or Business | | Type Name of Individual or Business | |
| | LING OFFICER COPY-ACKNOWLEDGEMENT | STANDARD FORM - | - UNIFORM COMMERCIAL CODE FORM UCC |