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.
RO. BOX 218
ANDKA, MN. 58303
(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 |
| SECURITY PACIFIC HOUS | ING SERVICES, INC. | Date, Fitte, Iddition British Conce |
| A DIVISION OF BANK OF | AMERICA FSB | |
| P.O. BOX 385000 | | |
| BIRMINGHAM, ALABAMA 35238-5000 | | |
| | | |
| Pre-paid Acct. # | - | |
| 2. Name and Address of Debtor | (Last Name First if a Person) | |
| TAYLOR, WILLIAM D | | |
| 288 GREENPARK SOUTH | | 00 1. |
| PELHAM, AL 35124 | <u> </u> | |
| | en la | |
| | | |
| Social Security/Tax ID # 2A. Name and Address of Debtor (IF AN | VY) (Last Name First if a Person) | |
| • | | |
| TAYLOR, DEBRA J | | |
| 288 GREENPARK SOUTH | | |
| PELHAM AL 35124 | | Ö |
| | | |
| Social Security/Tax ID # | | FILED WITH: |
| ☐ Additional debtors on attached UCC-E | | |
| 1. NAME AND ADDRESS OF SECURED PARTY) (| (Last Name First if a Person) | 4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person |
| A DIVISION OF BANK OF P.O. BOX 385000 BIRMINGHAM, ALABAMA Social Security/TaxiD # | 35238-5000 | |
| ☐ Additional secured parties on attached UCC-E | | |
| 5. This statement refers to original Financing St | tatement bearing File No. =026145 | |
| Filed withSHELBY COUN | | Date Filed AUG 6 19 90 |
| 7. Partial or The Secured Party no longer claim 8. Partial or The Secured Party's right und 1 Full property described in item 11 Assignment. whose name and address app 9. Amendment Financing statement bearing fit 10. Partial Secured Party releases the confidence number shown above. | ns a security interest under the financing statement ter the financing statement bearing file number a or to all of the property listed on this file, is assig | nhown above to the property of |
| 11. | | was Pasa Madata Pasa |
| ACCOUNT PAID IN FULL | | 11A. Enter Code(s) From Back of Form That Best Describes The |
| ACCOUNT NUMBER 000530 | 03834 | Collateral Covered By This Filling: |
| • | | |
| - | | ······································ |
| | | |
| | | |
| | Trat # 1 | 994-26871 |
| | A 2 x | |
| Check X if covered: Products of Colleteral are | | |
| | 20/20/1 | 994-26871 |
| Signature(s) of Debtor(s) | | CERMAN AND IN |
| Signature(s) of Debtor(s) (necessary only if ite | em 9 is applicable) CUFT BY COUNTY | SECURITY PACIFIC HOUSING SERVICES |
| Type Name of Individual or Business | 001 58 | Type Name of Individual or Business |
| | | CTANDADO FODIA ISMEDOLA COMMERCIAL CODE FORM 18 |