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.

REORDEN FROM
Registré, Inc.
514 PIERCE ST.
P.O. BOX 218
ANOKA, NN. 55303
(612) 421-1713

		<u> </u>	
The Debtor is a transmitting utility	No. of Additional	This FINANCING STATEMENT is presented to	a Filing Officer for
as defined in ALA CODE 7-9-105(n). Return copy or recorded original to	Sheets Presented:	filing pursuant to the Uniform Commercial Co THIS SPACE FOR USE OF FILING OFFICER	
. Heldin copy of recorded singular to		Date, Time, Number & Filing Office	
SECURITY PACIFIC HOUSING	SERVICES, INC.		
A DIVISION OF BANK OF AME	RICA FSB		
P.O. BOX 385000			÷ .
BIRMINGHAM, ALABAMA 35238-5000			e dis
Pre-paid Acct #	,		
2. Name and Address of Debtor	(Last Name First if a Person)		ന മ
PARKER, R CLARK			<u>re</u>
1251 1ST AVE WEST			
ALABASTER, AL 35007	•		a H E
			8 3 8
Social Security/Tax ID #			~ ⁴ Ω
2A. Name and Address of Debtor (IF ANY)	(Last Name First if a Person		
PARKER, KRISTI			
1251 1ST AVE WEST			Ta Con Market
ALABASTER, AL 35007			£ 20 to ₹
			Ö
Social Security/Tax (D #		FILED WITH:	*
Additional debtors on attached UCC-E	***************************************		
3. NAME AND ADDRESS OF SECURED PARTY) (Las	it Name First if a Person)	4. ASSIGNEE OF SECURED PARTY (IF AN	Y) (Last Name First if a Person)
• · · · · · · · · · · · · · · · · · · ·	•		
P.O. BOX 385000 BIRMINGHAM, ALABAMA 3523 Social Security/Tax ID #	38-5000		
Additional secured parties on attached UCC-E			
5. This statement refers to original Financing States	ment bearing File No030005		
Filed withSHRLBY_COU	NTY	Date Filed DEC 2	19_91
7. Partial or The Secured Party no longer claims a 8. Partial or The Secured Party's right under the property described in Item 11 or to Assignment. Whose name and address appears 9. Amendment Financing statement bearing file no Secured Party releases the collate number shown above.	security interest under the financing state he financing statement bearing file numbers a all of the property listed on this file, is as	orth in item 11.	
11.			
ACCOUNT PAID IN FULL 2-10			11A. Enter Code(s) From Back of Form That
ACCOUNT NUMBER 00053000145			Best Describes The Collateral Covered
			By This Filling:
•			
•		•	
Check X if covered: Products of Colleteral are als	so covered.	······································	
		✓ ·	
Signature(s) of Debtor(s)		Signature(s) of Secured Party(ies)	
Signature(s) of Debtor(s) (necessary only if item 9	is applicable:	Signature(s) of Secured Party(ies)	
anginature (a) or Debtor(a) (trecessory Only it Refft 9	is applicantly		NO ODBUTORO TNO
Type Name of Individual or Business		SECURITY PACIFIC HOUST	NG SERVICES, INC