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.

☐ 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). Sheets Presented: 1. Return copy or recorded original to		THIS SPACE FOR USE OF FILING OFFICER
FIRST FAMILY FINANCIAL	SERVICES, INC.	Date, Time, Number & Filing Office
3594 PELHAM PKWY STE 10		
PELHAM, AL 35124		
•		
Pre-paid Acct. #		
2. Name and Address of Debtor CLEMONS, SAMUEL D.	(Last Name First if a Person	<u>v</u> 60 ≥
PO BOX 179		
WILSONVILLE, AL 35106		* % \$ _
•		J ÖQZE
		で
Social Security/Tax ID #	ANY) (Last Name First if a Person	n)
	, , , , , , , , , , , , , , , , , , ,	
Social Security/Tax ID #		
Additional debtors on attached UCC-E SECURED PARTY (Last Name First if a Person	<u>,,</u>	4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Pers
FIRST FAMILY FINANCIAL		
3594 PELHAM PKWY STE 1		
PELHAM, AL 35124		
Social Security/Tax ID #		· · · · · · · · · · · · · · · · · · ·
☐ Additional secured parties on attached UCC-E	•	
5. This statement refers to original Financing	Statement bearing File No INST	#1994-33914
Filed with SHELBY CO J	UDGE OF PROBATE	Date Filed 11/14/94 19
6. T Continuation. The original financing states 7. Termination. Secured Party no longer cla	nent between the foregoing Debtor and Secur-	red Party, bearing file number shown above, is still effective. stement bearing the file number shown above.
8. Partial or The Secured Party's right up	nder the financing statement bearing file numb It or to all of the property listed on this file, is a	ber shown above to the
Assignment, whose name and address a	ppears in item 4.	
	g file number shown above is amended as set collateral described in item 11 from the financi	
Release number shown above.		
11.		11A. Enter Code(s) From
		Back of Form That Best Describes The
		Collateral Covered By This Filing:
1051 MOTOULOUGE MODE	TE HOME 12 V 44 CEDT	· AT #719 ——————
19/1 TOWNHOUSE MOBI	LE HOME 12 X 66 SERI	AL 11/12 — — — — —
		
•		
	•	
Check X if covered: Products of Collateral	are also covered.	
Signature(s) of (Pebtor(s)		Signature(s) of Secured Party(ies)
Signature(s) of Debtor(s) (necessary only if		Signature(s) of Secured Party(ies)
SAMUEL D. CLEMONS	month of the apprince of the second of the s	FIRST FAMILY FINANCIAL SERVICES, INC.