## 63020

## 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
ANOKA, MN. 55303
(612) 421-1713

_				(OTS) 4%1-1/13
☐ The Debtor is a transmitting utility	No. of Additional	This FINANCING STA	ATEMENT is presented to a Filin	ng Officer for
as defined in ALA CODE 7-9-105(n).	Sheets Presented:	filing pursuant to the	Uniform Commercial Code.	
Return copy or recorded original to		THIS SPACE FOR USE OF FIL Date, Time, Number & Filing C		
CITICORP NATIONAL SERVIC	ES, INC			
formerly known as:				
CITICORP ACCEPTANCE CO.,	INC.			
P.O. BOX 790142				
ST. LOUIS, MO 63179				
•				
Pre-paid Acct. #		<del></del>		-
Name and Address of Debtor	(Last Name First if a Person)	•	ro C	m iii w
ARGO, RONNIE N.	•		2	O F E
ROUTE 2 BOX 404 F			₩.	马出星名
MONTEVALLO, AL 35115-96	09		<del>-</del>	0 - 2 -
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Social Security/Tax ID #	NY) (Last Name First if a Person	<del>,  </del>	*	てる意で
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FRYE, NORA A.			Č	<b>9.</b>
ROUTE 2 BOX 404 F	0.0		<b></b>	
MONTEVALLO, AL 35115-96	09			
On the Committee of The Land Committee of Th		FILED WITH:		
Social Security/Tax ID #				
☐ Additional debtors on attached UCC-E				(Landala Especial Description
3. NAME AND ADDRESS OF SECURED PARTY) CITICORP NATIONAL SERVI	(Last Name First if a Person) CES, INC	4. ASSIGNEE OF SECURED	PARTY (IF ANY)	(Last Name First if a Person)
formerly known as:				
CITICORP ACCEPTANCE CO.	, INC.	•		
P.O. BOX 790142				
ST. LOUIS, MO 63179 Social Security/Tax ID #	·			
☐ Additional secured parties on attached UCC-E			<u>.</u>	
5. This statement refers to original Financing S	Statement begging File No. 2173	- 625451	5/10/90	
5.4-1.5-14.50ALLE		Date Filed	7/2	19 <u>85</u>
6. Continuation. The original financing statement			above, is still effective.	<u>,</u>
7.  Termination. Secured Party no longer claim 8.  Partial or The Secured Party's right und Pull property described in item 11 Assignment. whose name and address app 9.  Amendment Financing statement bearing to	ns a security interest under the financing stat der the financing statement bearing file numb or to all of the property listed on this file, is a	ement bearing the file number show er shown above to the ssigned to the assignee forth in item 11.	n above.	
11.				
			•	11A. Enter Code(s) From Back of Form That
008 523282				Best Describes The Collateral Covered
000 727202				By This Filing:
	·			<u>600 602</u>
		•		
		•		
Check X if covered: Products of Collateral a	re also covered.			
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Cianal water of Parkings		Signature(s) of Sec		
Signature(s) of Debtor(s)				
Signature(s) of Debtor(s) (necessary only if its	em 9 is applicable)	Signature(s) of Sec	ured Party(ies) ATIONAL SERVIC	ES, INC.
The Name of health datumble of Developes		Type Name of Indiv		<u> </u>
Type Name of Individual or Business	•	- 11	····	