

Important: Read Instructions on Back Before Filling out Form.

REORDER FROM
Registré, Inc.
514 PIERCE ST.
P.O. BOX 218
ANOKE, MN. 55303
(612) 421-1713

<input type="checkbox"/> 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.	
1. Return copy or recorded original to MAGNA MORTGAGE COMPANY ATTN: DEBRA SPEAGLE P. O. BOX 18001 HATTIESBURG, MS 39404-8001 Pre-paid Acct. # _____				THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office <div style="text-align: center;">Inst # 1995-17973 07/10/1995-17973 12:21 PM CERTIFIED SHELBY COUNTY JUDGE OF PROBATE 001 NC3</div>	
2. Name and Address of Debtor (Last Name First if a Person) HUMPHREY, MELODY P. O. BOX 232 SAGINAW, AL 35137 Social Security/Tax ID # _____					
2A. Name and Address of Debtor (IF ANY) (Last Name First if a Person) CARDWELL, JOHN P. O. BOX 23 SAGINAW, AL 35137 Social Security/Tax ID # _____					
<input type="checkbox"/> Additional debtors on attached UCC-E				FILED WITH:	
3. NAME AND ADDRESS OF SECURED PARTY (Last Name First if a Person) MAGNOLIA FEDERAL BANK FOR SAVINGS P. O. BOX 1858 HATTIESBURG, MS 39403-1858 Social Security/Tax ID # _____				4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)	
<input type="checkbox"/> Additional secured parties on attached UCC-E					
5. <input type="checkbox"/> This statement refers to original Financing Statement bearing File No. <u>1994-33203</u> Filed with <u>SHELBY COUNTY JUDGE OF PROBATE</u> Date Filed <u>11 - 7</u> 19 <u>94</u>					
6. <input type="checkbox"/> Continuation. The original financing statement between the foregoing Debtor and Secured Party, bearing file number shown above, is still effective. 7. <input checked="" type="checkbox"/> Termination. Secured Party no longer claims a security interest under the financing statement bearing the file number shown above. 8. <input type="checkbox"/> Partial or <input type="checkbox"/> Full. The Secured Party's right under the financing statement bearing file number shown above to the property described in item 11 or to all of the property listed on this file, is assigned to the assignee whose name and address appears in item 4. 9. <input type="checkbox"/> Amendment. Financing statement bearing file number shown above is amended as set forth in item 11. 10. <input type="checkbox"/> Partial Release. Secured Party releases the collateral described in item 11 from the financing statement bearing file number shown above.					
11. 87-69153526 P/O 6-22-95					
11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing: _____ _____ _____ _____ _____ _____ _____					
Check X if covered: <input type="checkbox"/> Products of Collateral are also covered.					
Signature(s) of Debtor(s) _____ Signature(s) of Debtor(s) (necessary only if item 9 is applicable) _____ Type Name of Individual or Business _____				MAGNOLIA FEDERAL BANK FOR SAVINGS <i>Carole Cantrell</i> _____ Signature(s) of Secured Party(ies) _____ Signature(s) of Secured Party(ies) CAROLE CANTRELL, VICE PRESIDENT _____ Type Name of Individual or Business	
(1) FILING OFFICER COPY - ALPHABETICAL (2) FILING OFFICER COPY - NUMERICAL		(3) FILING OFFICER COPY - ACKNOWLEDGEMENT (4) FILE COPY - SECURED		(5) FILE COPY DEBTOR(S)	
STANDARD FORM — UNIFORM COMMERCIAL CODE — FORM UCC-1 Approved by The Secretary of State of Alabama					