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.

Registre, Inc.
514 PIERCE ST.
P.O. BOX 218
ANOKA, MN. 55303
(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 prefiling pursuant to the Uniform Comm	resented to a Filing Officer for mercial Code.
Return copy or recorded original to		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	
CENTRAL STATE BANK POST OFFICE BOX 180 CALERA, ALABAMA 35040			95-19591 SERTIFIE SERTIFIE 30
Pre-paid Acct. #			
Name and Address of Debtor	(Last Name First if a Person)		
CARLOYN AMOS BRASHER POST OFFICE BOX 254 CALERA, ALABAMA 35040			Inst.
Social Security/Tax ID #	(Last Name First if a Person)		
Social Security/Tax ID #			
Additional debtors on attached UCC-E			de anno
3. SECURED PARTY (Last Name First if a Person)		4. ASSIGNEE OF SECURED PARTY	(IF ANY) (Last Name First if a Person)
CENTRAL STATE Highway 25 P.O. Calera, Alabama	Box 180		
Social Security/Tax ID #	·		
Additional secured parties on attached UCC-E 5.XX This statement refers to original Financing Statement bearing File No Filed with SHELBY COUNTY PROBATE JUDGE		~ 1995-00679 	
6. Continuation. The original financing statement beto property described in item 11 or to a Assignment. 7. Termination. Secured Party no longer claims 4 at a few property described in item 11 or to a property described i	tween the foregoing Debtor and Secured Pa scurity interest under the financing statement financing statement bearing file number shall of the property listed on this file, is assign	arty, bearing file number shown above, is still not bearing the file number shown above. In above to the led to the assignee in item 11. In attement bearing file	
1989 SUNDANCE BOAT SERIAL MOBILE HOME SERIAL NUMBER		389 AND 1965	11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filling:
	• ·		
		•	
Check X if covered: Products of Collateral are also	covered.	1	<u> </u>
Signature(s) of Debtor(s)		Signaturers) of Secured Partyles) CENTRAL STATE	
Signature(s) of Debtor(s) (necessary only if item 9 is	з аррисавче)	Signature(s) of Secured Party(ies)	
Type Name of Individual or Business (1) FILING OFFICER COPY — ALPHARETICAL (3) FILING (DEFICER COPY ACKNOWLEDGEMENT	Type Name of Individual or Busine	ess FORM — UNIFORM COMMERCIAL CODE — FORM UCC-3