

1. Return copy or recorded original to:

MASTERGUARD REGION OFFICE  
P O BOX 885  
COLUMBUS GA 31902-0885

Pre-paid Acct. #

2. Name and Address of Debtor

(Last Name First if a Person)

CRAWFORD, DENNIS K  
1060 SOUTH RIVER RD  
SHELBY AL 35143

Social Security/Tax ID #

2A. Name and Address of Debtor

(IF ANY)

(Last Name First if a Person)

CRAWFORD, BETH H  
1060 SOUTH RIVER RD  
SHELBY AL 35143

Social Security/Tax ID #

☐ Additional debtors on attached UCC-E

3. NAME AND ADDRESS OF SECURED PARTY (Last Name First if a Person)

MASTERGUARD REGION OFFICE  
P O BOX 885  
COLUMBUS GA 31902-0885

Social Security/Tax ID #

☐ Additional secured parties on attached UCC-E

5. The Financing Statement Covers the Following Types (or items) of Property:

1 HEAT DETECTOR  
2 380T SMOKE DETECTORS

Check X if covered: ☐ Products of Collateral are also covered.

6. This statement is filed without the debtor's signature to perfect a security interest in collateral (check X, if so)

- ☐ already subject to a security interest in another jurisdiction when it was brought into this state.  
☐ already subject to a security interest in another jurisdiction when debtor's location changed to this state.  
☐ which is proceeds of the original collateral described above in which a security interest is perfected.  
☒ acquired after a change of name, identity or corporate structure of debtor  
☒ as to which the filing has lapsed.

THIS SPACE FOR USE OF FILING OFFICER  
Date, Time, Number & Filing Office

Inst # 1995-27263  
09/28/1995-27263  
09:01 AM CERTIFIED  
SHELBY COUNTY JUDGE OF PROBATE  
001 MCD 17.35

FILED WITH:

4. ASSIGNEE OF SECURED PARTY

(IF ANY)

(Last Name First if a Person)

5A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing:

300 — — — — —  
— — — — —  
— — — — —  
— — — — —  
— — — — —  
— — — — —  
— — — — —

7. Complete only when filing with the Judge of Probate:

The initial indebtedness secured by this financing statement is \$ 856.80

Mortgage tax due (15¢ per \$100.00 or fraction thereof) \$ 1.35

8. ☐ This financing statement covers timber to be cut, crops, or fixtures and is to be cross indexed in the real estate mortgage records (Describe real estate and if debtor does not have an interest of record, give name of record owner in Box 5)

Signature(s) of Secured Party(ies)  
(Required only if filed without debtor's Signature — see Box 6)

Signature(s) of Secured Party(ies) or Assignee

JOHN SLUDER REGION OFFICE MANAGER  
Signature(s) of Secured Party(ies) or Assignee

Signature(s) of Debtor(s)

Signature(s) of Debtor(s)

Type Name of Individual or Business

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