

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

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

Pre-paid Acct. #

2. Name and Address of Debtor (Last Name First if a Person)

SATTERWHITE, CHARLES ROBERT
16740 HIGHWAY 55
STERRETT AL 35147

Social Security/Tax ID

2A. Name and Address of Debtor (IF ANY) (Last Name First if a Person)

SATTERWHITE, BONNIE SUE
16740 HIGHWAY 55
STERRETT AL 35147

Social Security/Tax ID

☐ Additional debtors on attached UCC-E

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

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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:

2 HEAT DETECTORS
1 380T SMOKE DETECTOR
1 ABC FIRE EXTINGUISHER

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

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.

7. Complete only when filing with the Judge of Probate:
The initial indebtedness secured by this financing statement is \$1111.68

Mortgage tax due (15¢ per \$100.00 or fraction thereof) \$1.80

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 Debtor(s)

Signature(s) of Debtor(s)

Type Name of Individual or Business

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

JOHN SLUDER-REGION OFFICE MANAGER

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

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