

# STATE OF ALABAMA — UNIFORM COMMERCIAL CODE — FINANCING STATEMENT FORM UCC-1 ALA.

**Important: Read Instructions on Back Before Filling out Form.**

REORDER FROM  
**Registre, Inc.**  
514 PIERCE ST.  
P.O. BOX 218  
ANOKA, 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:  <b>BAHS BANK OF AMERICA, FSB</b> <b>PO BOX 385000</b> <b>BIRMINGHAM, AL 35238</b>  Pre-paid Acct. # _____		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office   <div style="transform: rotate(-90deg); transform-origin: center;">             1st # 1995-36427              12/20/1995-36427              09:19 AM CERTIFIED              SHELBY COUNTY JUDGE OF PROBATE              33.00              001 SNA           </div>
2. Name and Address of Debtor (Last Name First if a Person) <b>MITCHEM, JUANITA</b> <b>2292 HWY 32</b> <b>CHELSEA, AL 35043</b>  <div style="background-color: black; width: 100px; height: 20px; margin: 0 auto;"></div> Social Security/Tax ID # _____		
2A. Name and Address of Debtor (IF ANY) (Last Name First if a Person)    Social Security/Tax ID # _____		
<input type="checkbox"/> Additional debtors on attached UCC-E		
3. NAME AND ADDRESS OF SECURED PARTY (Last Name First if a Person)  <b>BAHS BANK OF AMERICA, FSB</b> <b>PO BOX 385000</b> <b>BIRMINGHAM, AL 35238</b>  Social Security/Tax ID # _____		4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)    FILED WITH:
<input type="checkbox"/> Additional secured parties on attached UCC-E		
5. The Financing Statement Covers the Following Types (or items) of Property:  <b>1986 RIVEROAKS RIVER MIST 14X80 ROC-15645-AL</b>  <b>INCLUDING BUT NOT LIMITED TO ALL FURNITURE, FIXTURES, APPLIANCES AND ANY REPLACEMENTS THEREOF.</b>  <b>THIS FINANCING STATEMENT WILL BE EFFECTIVE UNTIL A TERMINATION STATEMENT IS FILED.</b>  <b>ACCOUNT #: 53301132</b>		
<div style="display: flex; justify-content: space-between;"> <div>             Check X if covered: <input type="checkbox"/> Products of Collateral are also covered.           </div> <div style="text-align: right;">             5A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing:               _____              _____              _____              _____              _____              _____              _____  <b>11,914.10</b> </div> </div>		
6. This statement is filed without the debtor's signature to perfect a security interest in collateral (check X, if so) <input type="checkbox"/> already subject to a security interest in another jurisdiction when it was brought into this state. <input type="checkbox"/> already subject to a security interest in another jurisdiction when debtor's location changed to this state. <input type="checkbox"/> which is proceeds of the original collateral described above in which a security interest is perfected. <input type="checkbox"/> acquired after a change of name, identity or corporate structure of debtor <input type="checkbox"/> 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 \$ _____ Mortgage tax due (15¢ per \$100.00 or fraction thereof) \$ _____  8. <input type="checkbox"/> 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 Debtor(s)  _____ Signature(s) of Debtor(s) _____ Type Name of Individual or Business		Signature(s) of Secured Party(ies) (Required only if filed without debtor's Signature — see Box 6)  <b>BAHS BANK OF AMERICA, FSB</b> _____ Signature(s) of Secured Party(ies) or Assignee _____ Type Name of Individual or Business