## 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.

REORDER FROM

Registré, Inc.
514 PIERCE 5T.
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 O	This FINANCING STATEMENT is presented filling pursuant to the Uniform Commercial		r
Return copy or recorded original to		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	<u> </u>	<u> </u>
Ms. Lisa W. Braun		Date, Time, Number & Fining Office		
Metropolitan Life Insurance Company				
303 Perimeter Center North, Suite 600		ļ		
Atlanta, Georgia 30346		<u> </u>		
Pre-paid Acct. #				
2. Name and Address of Debtor	(Last Name First if a Person)			
ROSC Associates Joint Ven	iture	:		·**
2200 Woodcrest Place			<i>L</i> − •π	يه الله الله
Birmingham, AL 35209			<b>₩</b>	4 T B
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Social Security/Tax ID #	(Last Name First if a Person)	_ <del></del>	4	01
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			<b>}i</b>	
Social Security / Tax ID #	<del></del>	FILED WITH:		
Additional debtors on attached UCC-E		Shelby County, AL		
3. NAME AND ADDRESS OF SECURED PARTY) (Last N	·	4. ASSIGNEE OF SECURED PARTY (IF	ANY) (Last	Name First if a Person)
Metropolitan Life Insuran	ce Company			
One Madison Avenue				
New York, NY 10010				
Social Security/Tax ID #				
☐ Additional secured parties on attached UCC-E				
5. X This statement refers to original Financing Stateme	ent bearing File No 027172			
Filed with Shelby County, Al	<u>L</u>	Date Filed December 2	20 <b>,</b> 19 90	
·		d Party, bearing file number shown above, is still effective	<b>)</b> .	<del></del>
7. Termination. Secured Party no longer claims a second Party's right under the	curity interest under the financing state financing statement bearing file numbe			
☐ Full property described in item 11 or to a	If of the property listed on this file, is as:			
Assignment. whose name and address appears in 9. Amendment. Financing statement bearing file num	n item 4. nber shown above is amended as set fo	orth in item 11.		
•	described in item 11 from the financing	g statement bearing file	·	
Release number shown above.  11.				
Loan No. 700499			11A, Ente	er Code(s) From
			Bac	k of Form That t Describes The
				ateral Covered This Filing:
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			2_0	0_0
			3_(	0_0
				$\frac{0}{0}$ $\frac{0}{0}$ $$
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Check X if covered: Products of Collateral are also	covered	Metropolitan Life Insuran	1Ce Campan	<u> </u>
The transfer of the transfer o			.cc ompan	<u>y</u>
Signaturate) of Dahtaria	· · · · · · · · · · · · · · · · · · ·	By Spraturofs) of Secured Partitions	Len	
Signature(s) of Debtor(s)		Signature(s) of Secured Party(ies)		
Signature(s) of Debtor(s) (necessary only if item 9 is	applicable)	Signature(s) of Secured Party(ies)		
Type Name of Individual or Business		Robert P. Edwards,  Type Name of Individual or Business	Asst. Vi	ce President
	ESICED CORV ACKNOW! STICEMENT		LINIEODM COMMEDO	CIAL CODE — FORM LICC-3