## 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 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 presented to a Filling pursuant to the Uniform Commercial Code.	iling Officer for
Return copy or recorded original to		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	EXXXXX		
MAGNA MORTGAGE			
P O BOX 18001			50 路出海
HATTIESBURG, MS 394	03		15 15 8 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Pre-paid Acct. #			
. Name and Address of Debtor	(Last Name First if a Person)		
JOHN M & VICTORA G DA	VNEY		TOTAL SERVICE
PEAVINE TR PRK LOT 45			中には、これを
ALABASTER, AL 35007		•	
			がまる。 のに 第
Social Security/Tax ID #	<del>,</del>		
A. Name and Address of Debtor (IF A	NY) (Last Name First if a Person		02/4 02:40 SEE
	·•		
		FILED WITH:	<del></del>
Social Security/Tax ID #	<u> </u>		
Additional debtors on attached UCC-E  NAME AND ADDRESS OF SECURED PARTY)	(Last Name First if a Person)	4. ASSIGNEE OF SECURED PARTY (IF ANY)	(Last Name First if a Person)
MAGNOLIA FEDERAL BANK	•		
P O BOX 1858 HATTIESBURG. MS 394	เทร		
HATTIESBURG, MS 394	103		
Social Security/Tax IO #	· · · · · · · · · · · · · · · · · · ·		
Additional secured parties on attached UCC-E			
5. This statement refers to original Financing SHELBY CO	Statement bearing File No. 28443	Date Filed 9-19-94	
6. Continuation. The original financing statem 7. X Termination. Secured Party no longer claim 8. Partial or The Secured Party's right or property described in item 1 whose name and address and 9. Amendment Financing statement bearing	ims a security interest under the financing stated and the financing statement bearing file number to all of the propertypisted on this file, is a	ssigned to the assignee forth in item 11.	
11.			114 Enter Cadalah Eram
0000154010			11A. Enter Code(s) From Back of Form That Best Describes The
8739154810			Collateral Covered By This Filing:
p/o 2-02-96			
•			
<b>*4</b>			·
Check X if covered:  Products of Collateral	are also covered		
CHECK A II COVERED: L.J. PRODUCES OF CONSTRETAL	G. O C.		
Cianatura(a) of Dathtor(a)		Signaturg(s) of Secured Party(igs)	
Signature(s) of Debtor(s)		( neal , Canter	CANDETT VICE DEC
Signature(s) of Debtor(s) (necessary only if	item 9 is applicable)	Signature(a) of Secured Party(les) CAROLE MAGNOLIA FEDERAL BANK	FOR SAVINGS
Type Name of Individual or Business	FILING OFFICER COPY-ACKNOWLEDGEMENT	Type Name of Individual or Business STANDARD FORM — UN	FORM COMMERCIAL CODE — FORM UCC-3