

28367

READER FROM
Registro, Inc.
314 PIERCE ST.
P.O. BOX 218
ANOKE, 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: CENTRAL STATE BANK POST OFFICE BOX 180 CALERA, ALABAMA 35040				THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	
Pre-paid Acct. #				Inst # 1996-21968 07/09/1996-21968 11:26 AM CERTIFIED SHELBY COUNTY JUDGE OF PROBATE 18.30 001 MCB	
2. Name and Address of Debtor (Last Name First if a Person) JAMES SALTER POST OFFICE BOX 415 MONTEVALLO, ALABAMA 35115					
Social Security/Tax ID #					
2A. Name and Address of Debtor (IF ANY) (Last Name First if a Person) Social Security/Tax ID #				FILED WITH: SHELBY COUNTY JUDGE OF PROBATE	
<input type="checkbox"/> Additional debtors on attached UCC-E				4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)	
3. NAME AND ADDRESS OF SECURED PARTY (Last Name First if a Person) CENTRAL STATE BANK Highway 25 P.O. Box 180 Calera, Alabama 35040				5. The Financing Statement Covers the Following Types (or items) of Property: NEW UNIDEN 4500 SATELITTE SYSTEM	
Social Security/Tax ID #				7. Complete only when filing with the Judge of Probate: The initial indebtedness secured by this financing statement is \$ 2,175.00 Mortgage tax due (15¢ per \$100.00 or fraction thereof) \$ 18.30	
<input type="checkbox"/> Additional secured parties on attached UCC-E				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)	
5. The Financing Statement Covers the Following Types (or items) of Property: NEW UNIDEN 4500 SATELITTE SYSTEM				8A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing: _____ _____ _____ _____ _____ _____ _____ _____	
Check X if covered: <input type="checkbox"/> 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) <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.				Signature(s) of Secured Party(ies) (Required only if filed with debtor's signature — see Box 6) [Signature] CENTRAL STATE BANK Signature(s) of Secured Party(ies) or Assignee	
Signature(s) of Debtor(s) [Signature] Signature(s) of Debtor(s)				Type Name of Individual or Business	
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					