

STATE OF ALABAMA — UNIFORM COMMERCIAL CODE  
STATEMENTS OF CONTINUATION, PARTIAL RELEASE, ASSIGNMENT, ETC. — FORM UCC-3

<input type="checkbox"/> The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n).		No. of Additional Sheets Presented: 0	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>PLEASE RETURN TO:</b> OT Corporation Attn: John S. Ritter 49 Stevenson St. Ste. 300 San Francisco, CA 94105 (800) 874-8820			THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office																																																																																																					
Pre-paid Acct. # _____			<div style="writing-mode: vertical-rl; transform: rotate(180deg);">Inst # 1996-22799-22799</div> <div style="writing-mode: vertical-rl; transform: rotate(180deg);">07/16/93 6622-22799-22799</div> <div style="writing-mode: vertical-rl; transform: rotate(180deg);">08:53 AM: CERTIFIED</div> <div style="writing-mode: vertical-rl; transform: rotate(180deg);">SHELBY COUNTY COURTHOUSE</div> <div style="writing-mode: vertical-rl; transform: rotate(180deg);">001 MCD</div>																																																																																																					
2. Name and Address of Debtor (Last Name First if a Person)  MCDONALD, WILLIE D P.O. BOX 1062 A ALABASTER, AL 35007																																																																																																								
Social Security / Tax ID # _____																																																																																																								
2A. Name and Address of Debtor (IF ANY) (Last Name First if a Person)																																																																																																								
Social Security / Tax ID # _____			FILED WITH: <b>Shelby</b>																																																																																																					
<input type="checkbox"/> Additional debtors on attached <del>XXX</del>			4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)																																																																																																					
3. NAME AND ADDRESS OF SECURED PARTY  JEFFERSON FEDERAL S&L ASSOC 215 N 21ST ST BIRMINGHAM, AL 35203																																																																																																								
Social Security / Tax ID # _____																																																																																																								
<input type="checkbox"/> Additional secured parties on attached <del>XXX</del>																																																																																																								
5. <input checked="" type="checkbox"/> This statement refers to original Financing Statement bearing File No. <b>023865</b>			Date Filed <b>9/10/89</b>																																																																																																					
Filed with <b>Shelby</b>																																																																																																								
6. <input type="checkbox"/> Continuation. The original financing statement between the foregoing Debtor and Secured Party, bearing file number shown above, is still effective.																																																																																																								
7. <input checked="" type="checkbox"/> Termination. Secured Party no longer claims a security interest under the financing statement bearing the file number shown above.																																																																																																								
8. <input type="checkbox"/> Partial or Full Assignment. The Secured Party's right under the financing statement bearing file number shown above to the property described in item 11 or to all of the property listed on this file, is assigned to the assignee whose name and address appears in item 4.																																																																																																								
9. <input type="checkbox"/> Amendment. Financing statement bearing file number shown above is amended as set forth in item 11.																																																																																																								
10. <input type="checkbox"/> Partial Release. Secured Party releases the collateral described in item 11 from the financing statement bearing file number shown above.																																																																																																								
11. <b>Termination: The secured party no longer claims a security interest under the financing statement bearing the file number shown above.</b>																																																																																																								
11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing: <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>																																																																																																								
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Check X if covered: <input type="checkbox"/> Products of Collateral are also covered.			Signature(s) of Secured Party(ies) <b>THOMAS H. ADAMS, DOCUMENT REVIEW</b>																																																																																																					
Signature(s) of Debtor(s)			Type Name of Individual or Business																																																																																																					
Type Name of Individual or Business			STANDARD FORM — UNIFORM COMMERCIAL CODE — FORM UCC-3 Approved by The Secretary of State of Alabama AL3-101994																																																																																																					