

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
Register, Inc.
514 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 MAGNA MORTGAGE COMPANY P O BOX 18001 HATTIESBURG, MS 39404		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office
2. Name and Address of Debtor (Last Name First if a Person) DONALDSON, MAUDE P O BOX 881 COLUMBIANA, AL 35051		<div style="writing-mode: vertical-rl; transform: rotate(180deg);"> Inst # 1996-24694 </div> <div style="writing-mode: vertical-rl; transform: rotate(180deg);"> 07/31/1996-24694 09:59 AM CERTIFIED SHELBY-COUNTY JUDGE OF PROBATE 001 REC </div>
2A. Name and Address of Debtor (IF ANY) (Last Name First if a Person) Social Security/Tax ID # _____		
3. NAME AND ADDRESS OF SECURED PARTY (Last Name First if a Person) MAGNOLIA FEDERAL BANK FOR SAVINGS P O BOX 1858 HATTIESBURG, MS 39403		
4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person) Social Security/Tax ID # _____		
<input type="checkbox"/> Additional debtors on attached UCC-E		FILED WITH:
<input type="checkbox"/> Additional secured parties on attached UCC-E		5. <input type="checkbox"/> This statement refers to original Financing Statement bearing File No. <u>1994- 31835</u> Filed with <u>SHELBY CO</u> Date Filed <u>12-21-94</u> 19__
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 <input type="checkbox"/> 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. <div style="font-size: 1.2em;">8769153156</div> <div style="font-size: 1.2em;">p/o 6-14-96</div>	11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing: <div style="border: 1px solid black; height: 100px; width: 100%;"></div>
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Check X if covered: <input type="checkbox"/> Products of Collateral are also covered. Signature(s) of Debtor(s) _____ Signature(s) of Debtor(s) (necessary only if item 9 is applicable) _____ Type Name of Individual or Business _____	<div style="text-align: center;"> Signature(s) of Secured Party(ies) SHANNON STUART, ASST. V. PRESIDENT Signature(s) of Secured Party(ies) MAGNOLIA FEDERAL BANK FOR SAVING Type Name of Individual or Business </div>
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