## 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.

F-0163

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☐ 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 filing pursuant to the Uniform Commercial (		tor
Return copy or recorded original to	<u> </u>	THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	•	
COLONIAL BANK		Date, Time, Number & Filing Office		
629 RED LANE ROAD		:		
BIRMINGHAM, AL 35215				_
ATTN: TIFFANY FLOOD			21	<u> (교</u> 년
REF: 005-8006582012			<del>-</del> -	コロ 番
1011. 003-0000302012		_	9.	9 H # 8
Pre-paid Acct. #			١	ᅄᇩᆂ
2. Name and Address of Debtor	(Last Name First if a Person)		96	<b>6</b> C S S S S S S S S S S S S S S S S S S
BROWN, RALPH			ŏ,	202
4585 COUNTY ROAD 30	•		71	7 <b>2 2 2</b>
WILSONVILLE, ALABAMA 35	5186		#	9 B T
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			ig g	8 3 8
Cooled Cooled / Tou ID #			H	Öğö,
Social Security/Tax ID #	(Last Name First if a Person)		•	<b>-</b>
••				
Social Security/Tax ID #				
Additional debtors on attached UCC-E	-			
3. SECURED PARTY (Last Name First if a Person)	<del></del>	4. ASSIGNEE OF SECURED PARTY (IF A	ANY) (L	ast Name First if a Person)
COLONIAL BA	NK			
629 RRD I				
BIRMINGHA	M. ALABAMA 35215			
	,			
Sanial Consults (Tou ID #				
Social Security/Tax ID #		- -		
Additional secured parties on attached UCC-E	<u> </u>	<u> </u>		
5. A This statement refers to original Financing Statement	ent bearing File No. <u>INST 19</u>	93-25477		<del></del>
Filed with SHELBY COUNTY	·	Date Filed_8-24	19 <u>_93</u> _	<del></del>
6. Continuation. The original financing statement bet 7. Termination. Secured Party no longer claims a secured Party no longer claim				
	financing statement bearing file number s			
	all of the property listed on this file, is assign	gned to the assignee		
9. Amendment Financing statement bearing file nur	mber shown above is amended as set fort			
<ol> <li>Partial Secured Party releases the collaters</li> <li>Release number shown above.</li> </ol>	al described in item 11 from the financing	statement bearing file		
11.				·····
			11A. U	Enter Code(s) From
•				Back of Form That Best Describes The
				Collateral Covered By This Filling:
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Check X if covered:  Products of Collateral are also	covered.			
•		1 2.		
Signature(s) of Debtor(s)		Signatural at Schrod (1989)		
		July 1/4	<u>TE</u>	RRI M. KEY
Signature(s) of Debtor(s) (necessary only if item 9 is	applicable)	Signature(s) of Section Party(ics)————————————————————————————————————		
Type Name of Individual or Business		Type Name of Individual or Business		
	OFFICER COPY ACKNOWLEDGEMENT OPY SECOND PARTY(S)	(5) FILE COPY DEBTOR(S)  STANDARD FORM – Approve	<ul> <li>UNIFORM COMM d by The Secretary</li> </ul>	IERCIAL CODE — FORM UCC-: of State of Alabama