

1. Return copy or recorded original to

THIS SPACE FOR USE OF FILING OFFICER  
Date, Time, Number & Filing Office

-CITICORP NATIONAL SERVICES, INC.  
formerly known as:  
CITICORP ACCEPTANCE COMPANY, INC.  
15851 CLAYTON ROAD  
ST. LOUIS, MO 63011

2. Name and Address of Debtor (Last Name First if a Person)

LITTLE, PEGGY J.  
244 GREEN PARK SOUTH MHP  
PELHAM, AL 35124-1309

Social Security/Tax ID #:

| 2A | Name and Address of Debtor | (IF ANY) | (Last Name First if a Person) |
|----|----------------------------|----------|-------------------------------|
|----|----------------------------|----------|-------------------------------|

N/A

Social Security/Tax ID #

**FILED WITH:**

☐ Additional debtors on attached UCC-E

3. NAME AND ADDRESS OF SECURED PARTY (Last Name First if a Person)  
CITICORP NATIONAL SERVICES, INC., formerly known as:  
CITICORP ACCEPTANCE COMPANY, INC.  
15851 CLAYTON ROAD  
ST. LOUIS, MO 63011  
Social Security/Tax ID # \_\_\_\_\_

4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)

☐ Additional secured parties on attached UCC-E

5. ☐ This statement refers to original Financing Statement bearing File No. 015445  
Filed with SHELBY COUNTY

Date Filed 10/21 19 91

6. ☒ Continuation. The original financing statement between the foregoing Debtor and Secured Party, bearing file number shown above, is still effective.

7. ☐ Termination. Secured Party no longer claims a security interest under the financing statement bearing the file number shown above.

8. ☐ 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. ☐ Amendment. Financing statement bearing file number shown above is amended as set forth in item 11.

10. ☐ Partial Release. Secured Party releases the collateral described in item 11 from the financing statement bearing file number shown above.

11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing:

**018-558866**

~~600~~    ~~602~~

Check X if covered: ☐ 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

Signature(s) of Secured Party(ies)

Signature(s) of Secured Party(ies)  
CITICORP NATIONAL SERVICES, INC.

Type Name of Individual or Business

STANDARD FORM — UNIFORM COMMERCIAL CODE — FORM UCC-3  
Approved by The Secretary of State of Alabama

(5) FILE COPY DEBTOR(S)

(3) FILING OFFICER COPY-ACKNOWLEDGEMENT  
(4) FILE COPY - SECURED

(1) FILING OFFICER COPY - ALPHABETICAL  
(2) FILING OFFICER COPY - NUMERICAL