

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

050585

Important: Read Instructions on Back Before Filling out Form.

REORDER FROM
Registre, Inc.
514 PIERCE ST.
P.O. BOX 218
ANOKA, 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 <div style="border: 1px solid black; padding: 5px;"> Compass Bank P.O.B. 10566 Bham, Al. 35296 1832263--003697 </div> Pre-paid Acct. # _____		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office <div style="font-size: 2em; transform: rotate(-90deg); display: inline-block;">Inst # 1996-39539</div> <div style="font-size: 2em; transform: rotate(-90deg); display: inline-block;">12/08/1996-39539</div> <div style="font-size: 2em; transform: rotate(-90deg); display: inline-block;">12:04 PM CERTIFIED</div> <div style="font-size: 2em; transform: rotate(-90deg); display: inline-block;">SHELBY COUNTY JUDGE OF PROBATE</div> <div style="font-size: 2em; transform: rotate(-90deg); display: inline-block;">25.00</div> <div style="font-size: 2em; transform: rotate(-90deg); display: inline-block;">801 NC3</div>
2. Name and Address of Debtor (Last Name First if a Person) <div style="border: 1px solid black; padding: 5px;"> Donovan E. Parker Barbara F. Parker 2119 Forestdale BLVD. Forestdale, Al. 35214 </div> Social Security/Tax ID # _____		
2A. Name and Address of Debtor (IF ANY) (Last Name First if a Person) <div style="border: 1px solid black; height: 40px; background-color: black;"></div> Social Security/Tax ID # _____		
<input type="checkbox"/> Additional debtors on attached UCC-E		
3. NAME AND ADDRESS OF SECURED PARTY (Last Name First if a Person) <div style="border: 1px solid black; padding: 5px;"> Central Bank Of The south 701 South 20th Street Bham, Al. 35233 </div> Social Security/Tax ID # _____		4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)
<input type="checkbox"/> Additional secured parties on attached UCC-E		FILED WITH:
5. <input type="checkbox"/> This statement refers to original Financing Statement bearing File No. <u>030946</u> Filed with <u>Shelby County</u>		Date Filed <u>4-10</u> 19 <u>92</u>
6. <input checked="" type="checkbox"/> Continuation. The original financing statement between the foregoing Debtor and Secured Party, bearing file number shown above, is still effective. 7. <input 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. 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 checked="" type="checkbox"/> Assignment. 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.		

Secured party- request U.C.C. be amended and continued without debtor's signature to read:

Compass Bank F/K/A Central Bank Of The south
 P.O.B. 10566
 Bham, Al. 35296

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

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)

Type Name of Individual or Business

Compass Bank F/K/A Central Bank of the South