

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

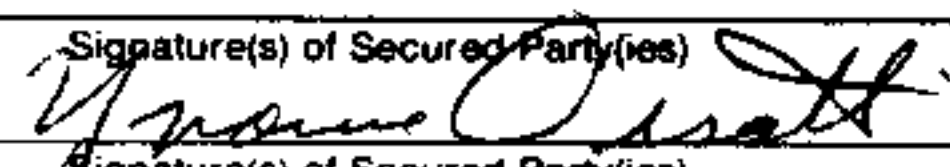
**045501**

**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  <b>CITICORP NATIONAL SERVICES INC.</b> <b>P.O. BOX 24610</b> <b>OKLAHOMA CITY, OK 73124</b>  <b>ACC#008-535534</b>  Pre-paid Acct. # _____		<div style="writing-mode: vertical-rl; transform: rotate(180deg);"> <b>Inst # 1996-39627</b>   <b>12/03/1996-39627</b>  <b>09:55 AM CERTIFIED</b>  <b>SHELBY COUNTY JUDGE OF PROBATE</b>  <b>001 MCB</b> </div>
2. Name and Address of Debtor (Last Name First if a Person)  <b>SCOTT, GINDY L. (MALONE)</b> <b>BROOKWOOD MHP LOT 15</b> <b>MONTEVALLA, AL 35040</b>  Social Security/Tax ID # _____		
2A. Name and Address of Debtor (IF ANY) (Last Name First if a Person)      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) <b>CITICORP NATIONAL SERVICES INC.</b> <b>formerly known as:</b> <b>CITICORP ACCEPTANCE CO., INC.</b> <b>15851 CLAYTON RD.</b> <b>ST. LOUIS, MO 63011-2297</b> Social Security/Tax ID # _____		4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)     FILED WITH: <b>SHELBY COUNTY JUDGE OF PROBATE</b>
<input type="checkbox"/> Additional secured parties on attached UCC-E		Date Filed <b>SEPTEMBER 5</b> 19 <b>90</b>
5. <input type="checkbox"/> This statement refers to original Financing Statement bearing File No. <b>026453</b> Filed with <b>SHELBY COUNTY JUDGE OF PROBATE</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. CONTINUATION: <b>5/25/95</b> FILE NO# <b>13714</b>	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>
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	Signature(s) of Secured Party(ies)  Signature(s) of Secured Party(ies) <b>CITICORP NATIONAL SERVICES INC.</b> Type Name of Individual or Business
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