

Important: Read Instructions on Back Before Filling out Form.

☐ 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

CENTRAL STATE BANK
POST OFFICE BOX 180
CALERA, ALABAMA 35040

Pre-paid Acct. # _____

2. Name and Address of Debtor

(Last Name First if a Person)

DANNY DEMONIA
JEFFREY DAVIS
1817 WOODBROOK CIRCLE
ALABASTER, ALABAMA 35007

Social Security/Tax ID # _____

2A. Name and Address of Debtor

(IF ANY)

(Last Name First if a Person)

Social Security/Tax ID # _____

☐ Additional debtors on attached UCC-E

3. NAME AND ADDRESS OF SECURED PARTY (Last Name First if a Person)

CENTRAL STATE BANK
Highway 25 P.O. Box 180
Calera, Alabama 35040

Social Security/Tax ID # _____

☐ Additional secured parties on attached UCC-E

5. ☐ This statement refers to original Financing Statement bearing File No

1994-30729

SHELBY COUNTY PROBATE OF JUDGE

Filed with

Date Filed:

10-10- 94

19_____

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

11.

1987 14 X 56 CAVALIER PACESETTER MOBILE HOME SN#4497

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

(3) FILING OFFICER COPY-ACKNOWLEDGEMENT

(4) FILE COPY - SECURED

(5) FILE COPY DEBTOR(S)

Signature(s) of Secured Party(ies)

CENTRAL STATE BANK

Signature(s) of Secured Party(ies)

Type Name of Individual or Business

STANDARD FORM — UNIFORM COMMERCIAL CODE — FORM UCC-3

Approved by The Secretary of State of Alabama