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

20650

Important: Read Instructions on Back Before Filling out Form.

REORDER FROM Registre, Inc.

	o. of Additional heets Presented:	This FINANCING STATEMENT is presented to a Filing O	officer for
ATTN: GLORIA CARROLL FIRST COMMERCIAL BANK P. O. BOX 11746 BIRMINGHAM, ALABAMA 35202-		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	
Pre-paid Acct # Name and Address of Debtor BWA DEVELOPMENT CORP. C/O HUNTER WILLIAMS 200 UNION HILL DRIVE BIRMINGHAM, ALABAMA 35209 Social Security/Tax ID # A Name and Address of Debtor (IF ANY)	(Last Name First if a Person) (Last Name First if a Person)	Inst # 1997-14766	OS/12/1997-14766 O1:53 PH CERTIFIED SELBY COUNTY SUBJE OF PROBATE DOI NO 10.00
Social Security/Tax ID # Additional debtors on attached UCC-E NAME AND ADDRESS OF SECURED PARTY) (Last Name	First if a Person)	FILED WITH: JUDGE OF PROBATE SHELBY 4. ASSIGNEE OF SECURED PARTY (IF ANY)	CO (Last Name First if a Person)
FIRST COMMERCIAL BANK P. O. BOX 11746 BIRMINGHAM, AL 35202-1746 Social Security/Tax ID # Additional secured parties on attached UCC-E	· .		
5. This statement refers to original Financing Statement beautiful.		1996-09064 Date Filed 3/20 19.5	
Filed with	the foregoing Debtor and Secured Parinterest under the financing statement cing statement bearing file number state property fisted on this file, is assign 4. shown above is amended as set forth	arty, bearing file number shown above, is still effective. In the file number shown above. In above to the line of	
LOT 30 SUBDIVISION THE OFFICE Check X if covered: Products of Collateral are also cove	AS RECORDED IN OF SHELBY COUNTY	DING TO THE SURVEY OF QUAIL MAP BOOK 22, PAGE 35, IN JUDGE OF PROBATE.	1A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing:
CIRECK A II COVERED. L. PRODUCIS OF COMMITTEE SIST SIST COVE		FIRST COMMERCIAL BANK	
Signature(s) of Debtor(s) Signature(s) of Debtor(s) (necessary only if item 9 is appli	cable)	BY: Sign TODD & BEARDuty(ies)	
Type Name of Individual or Business (1) FILING OFFICER COPY - ALPHABETICAL (3) FILING OFFICER	R COPY-ACKNOWLEDGEMENT	Type Name of Mandual or Submess STANDARD FORM — UNIFORM C	OMMERCIAL CODE — FORM UCC

(2) FILING OFFICER COPY - NUMERICAL