UNIFORM COMMÉRCIAL CODE

STATE OF FLORIDA FINANCING STATEMENT

FORM UCC-1 (REV. 1993)

| Debtor (Last Name First if | This Financing Statement is presented to a f | filing officer for filing pursua | nt to the Uniform Cor | Date of Birth | or FE## | |
|--|--|----------------------------------|-----------------------|---|---------------------------------|--|
| · | | 07/12/59 | | | | |
| DRUM JAMES R. A | | 1c. City, State | | | 1d. Zip Code | |
| | | ALABASTER | AL | | 35007 | |
| 2. Additional Debtor or Trade Name (Last Name First if an Individual) | | | 2a. | 2a. Date of Birth or FEH | | |
| | | Ottobal Charles | | | 2d. Zip Code | |
| 2b. Mailing Address | | 2c. City, State | | | | |
| 3. Secured Party (Last Name | First if an Individual) | <u> </u> | <u> </u> | <u> </u> | | |
| 3a. Mailing Address 3b. City, State | | | <u> </u> | | 3c. Zìp Code | |
| 3000 N. FEDERAL HIGHWAY 4. Assignee of Secured Party (Last Name First if an Individual) | | | DUSE PT FL | | 33064 | |
| | | | . • | | | |
| 4a. Mailing Address | | | | | 4c. Zip Code | |
| | MAN RD. covers the following types or items or prop | BROOKLYN | OH | n which local | ed and owner of record when | |
| 1989 MERCR | UISER 340 C324125 UISER 340 C324125 IAL INDEBTEDNESS SECURED TAX DUE (15¢ per \$100.00 | | | | 76, 055.85 | |
| 6. Check only if Applicable: | Products of collateral are also covered All documentary stamp taxes due an | | f collateral are also | | Debtor is transmitting utility. | |
| 7. Check appropriate box: (One box must be marked | d) Thorida Documentary Stamp Tax is n | | ade and payable p | | | |
| 8. In accordance with s. 679.402(2), F.S., this statement is filed without the Debtor's signature | | | | 9. Number of additional sheets presented: | | |
| to perfect a security interest in collateral: already subject to a security interest in another jurisdiction when it was brought into this state or debtor's location changed to this state. which is proceeds of the original collateral described above in which a security interest was perfected. as to which the filing has lapsed. Date filed and previous UCC-1 file number acquired after a change of name, identity, or corporate structure of the debtor. | | | | s Space for | Use of Filing Officer | |
| 10. Signature(s) of Debtor(s) | R.A. Duns | | | | 1 | |
| 11. Signature(s) of Secured Party or if Assigned, by Assignee(s) 12. Return Copy to: | | | | Inst * 1997-17199 | | |
| #3211003702004 Name KEY BANK USA, NA 5000 TIEDEMAN RD. BROUKLYN OH 44144 Address City, State, Zip | | | | 06/03/1997-17199 10:19 AM CERTIFIED SHELBY COUNTY JUDGE OF PROBATE 001 NCD 129.15 | | |