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

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 prifiling pursuant to the Uniform Comi	resented to a Filing Officer for mercial Code.	
Return copy or recorded original to		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office		
First National Bank of (Formerly of Columbiana	.)	Date, time, Nomber a Fining Office		
#2 Inverness Center Par Birmingham, Al 35242	Kway		5 5 5 5 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
re-paid Acct. #				
lame and Address of Debtor	(Last Name First if a Person)	- -	in in the	
Edmondson, Larry Wayne 104 Edmondson Lane Alabaster, Al 35007			6/1997—5621 # CEF	
locial Security/Tax tD #	(Last Name First if a Person)		10.27 1.0.28 1.0	
Edmondson, Patricia 104 Edmondson Lane Alabaster, Al 35007	•			
Social Security/Tax ID #				
Additional debtors on attached UCC-E SECURED PARTY (Last Name First if a Person)		4. ASSIGNEE OF SECURED PARTY	(IF ANY) (Last Name First if a Person)	
First National BAnk of (Formerly of Columbian #2 Inverness Center Par Birmingham, Al 35242	na)			
Additional secured parties on attached UCC-E		_		
	1002 2270	<u> </u>	<u> </u>	
This statement refers to original Financing Statement Filed with Shelby County Jude	bearing File No. 1992=2.370/ 	Date Filed 10-16	19 02	
Continuation. The original financing statement between the first termination. Secured Party no longer claims a secured Partial or The Secured Party's right under the first property described in item 11 or to all expenses appears in its property described in item 12 or its property described in ite	rity interest under the financing staten ancing statement bearing file number of the property listed on this file, is ass tem 4. er shown above is amended as set for	nent bearing the file number shown above. shown above to the igned to the assignee th in item 11.	- -	
			11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered y By This Filling:	
	-	•		
`				
	•			
Check X if covered: Products of Collateral are also co	overedi.			
Signature(s) of Debtor(s)		Signature(s) of Secured Party(ies)		
Signature(s) of Debtor(s) (necessary only if item 9 is a arry Wayne Edmondson, Patr		Signature(s) of Secured Party(les First National F Type Name of Individual or Busin	Rank of Shelby County	