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

050607 Important: Read Instructions on Back Before Filling out Form.

	L No of Additional	This FINANCING STATEMENT is presented	to a Filing Officer for
The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n).	No. of Additional Sheets Presented:	fiting pursuant to the Uniform Commercial (Code.
Return copy or recorded original to		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	
PIDOM COMMENTOAT DANK			
FIRST COMMERICAL BANK	•	·	
ATTN: GLORIA CARROLL			nı 🗭
P.O. BOX 11746			90 WH
BIRMINGHAM, AL. 35202	2–1746		は 光正巻 _
Pre-paid Acct. #		3 9 -9 1	· · · · · · · · · · · · · · · · · · ·
2. Name and Address of Debtor	(Last Name First if a Person)	1	
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SHELBY FOREST ESTATES,			
2233 CAHABA VALLEY DR	[VE		7 £ £ 9
RIEM MARINE, ALABAMA 3	52 4 2	j	
ATTN: KENNETH B. WEYGA	AND	-	ギ らむずっ
Social Security/Tax ID #	Y) (Last Name First if a Person)	_{	H - B
2A. Name and Address of Debtor (IF AN	(Last Name First II & Ferson)		•
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☐ Additional debtors on attached UCC-E 3. NAME AND ADDRESS OF SECURED PARTY) (1)	Lost Nama Eirot if a Barron)		ANY) (Last Name First if a Person)
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BIRMINGHAM, ALABAMA Social Security/Tax ID # Additional secured parties on attached UCC-E			
	INST. #	1996-18268	8.6
5. This statement reference control Fine Control of Filed with		Date Filed	70
7.	s a security interest under the financing statement the financing statement bearing file number sometimes and the property listed on this file, is assigned.	shown above to the gned to the assignee in item 11.	
LOT 55 ACCORDING TO AS RECORDED IN MAP BOO OFFICE OF SHELBY COUNTY, ALABAMA.	OK 21, PAGE 117 A & B		11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered 1 By This Filling:
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	t.		<i>_</i>
Check X if covered: Products of Collateral are	also covered.		///
		PIDOS CONSTRUCTO - L	
Signaturale) of Debte-(-)		FIRST COMMEDICAL BANK	
Signature(s) of Debtor(s)		BY : Speety e(s) of Secured Minuster	
Signature(s) of Debtor(s) (necessary only if item	9 is applicable)	Signature(s) M Secured Perturing	7.78
Type Name of Individual or Business	<u> </u>	PAUL H. SCHARACTER, V	ICE PRESIDENT
	G OFFICER COPY-ACKNOWLEDGEMENT	Type Name of Individual or Business	
4 	CODY CENTRES		UNIFORM COMMERCIAL CODE — FORM UCC-3 by The Secretary of State of Alabama