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. 19082

REORDER FROM
Registré. Inc.
514 PIERCE ST.
P.O. BOX 218
ANOKA, MN. 55303

| | | 970 | 9-11000 | 12) 421-1713 |
|---|--|---|---|--|
| ☐ The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n). | No. of Additional Sheets Presented: | This FINANCING STATEMENT is pre- filing pursuant to the Uniform Commo | sented to a Filing Office ercial Code. | r for |
| nett, Brown, Turner, No. 340 Woodcrest Place, St. 35209 | | THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office | | |
| Pre-paid Acct # | (Last Name First if a Person | | * 1997-31685 | AM CERTIFIED AM CERTIFIED AMIN JUDGE OF PROBATE ACT ACT ACT ACT ACT ACT ACT |
| Social Security/Tax ID #_ 2A. Name and Address of Debtor hoemaker, Sherrie C. 197 Castlehill Road irmingham, AL 35242 | ANY) (Last Name First if a Person | | Inst | 10/01 10/03 98EB |
| | | FILED WITH: | | |
| Social Security/Tax ID # Additional debtors on attached UCC-E | · · · · · · · · · · · · · · · · · · · | FILED WHITE: | | i |
| Social Security/Tax ID # | | | | |
| 5. This statement refers to original Financing | | | 06 | |
| | inty Probate | Date Filed 9/20/96 | | |
| 7. Partial or The Secured Party no longer class 8. Partial or The Secured Party's right use Full property described in item 1 Assignment, whose name and address a 9. Amendment Financing statement bearing | tims a security interest under the financing stat inder the financing statement bearing file numb If or to all of the property listed on this file, is a | er shown above to the ssigned to the assigned to the assignee forth in item 11. | nective. | •• . |
| 11. | | | | Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing: |
| - | | • | | |
| | ì | | | |
| Check X if covered: Products of Collateral | are also covered | · · · · · · · · · · · · · · · · · · · | | |
| Signature(s) of Debtor(s) | | Signal (s) of Secured Party(es) |) | |
| Signature(s) of Debtor(s) (necessary only if Michael A. Shoemaker & Type Name of Individual or Business | item 9 is applicable) Sherrie C. Shoemaker | First Commercial B Type Name of Individual or Busines | | |