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. 30173

REORDER FROM
Registré, Inc.
514 PIERCE ST.
P.O. BOX 218
ANOKA, MN. 55303
(612) 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 presented to a Filing Officer for 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	
MAGNA MORTGAGE CO P O BOX 18001 HATTIESBURG, MS	OMPANY 39404		
		- ~	
Pre-paid Acct. # 2. Name and Address of Debtor	(Last Name First if a Person)		~
RIFFE, DWAYNE RR 4, BOX 195 MONTEVALLO, AL 35115		997-39451 CERTIFIE JUNE OF PROBATE	
Social Security/Tax ID #			(T) (C)
2A Name and Address of Debtor (IF A RIFFE, CARLA SAME AS ABOVE	NY) (Last Name First if a Person)		12/04/1 10:14 AM 10:14 AM SELBY COUNT
Social Security (Tax ID #		FILED WITH:	<u> </u>
Social Security/Tax ID #			
Additional debtors on attached UCC-E 3. NAME AND ADDRESS OF SECURED PARTY)	(Last Name First if a Person)	4. ASSIGNEE OF SECURED PARTY (IF ANY)	(Last Name First if a Person)
MAGNOLIA FEDERAL P O BOX 1858 HATTIESBURG, MS Social Security/Tax ID # Additional secured parties on attached UCC-E	39403		
	Statement bearing File No	1994-30902	
5. This statement refers to original Financing Statement bearing File No		Date Filed	
6. Continuation. The original financing statem. 7. Termination. Secured Party no longer clair. 8. Partial or The Secured Party's right unproperty described in item 11. Assignment. whose name and address ap. 9. Amendment Financing statement bearing. 10. Partial Secured Party releases the continuation. Release number shown above.	ms a security interest under the financing state der the financing statement bearing file numbe for to all of the property listed on this file, is as	er shown above to the signed to the assignee orth in item 11	
11.			11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing:
		· ·	
Check X if covered: Products of Collateral a	re also covered. UNI	ON PLANTERS BANK OF SOUT	
		SUCCESSOR BY MERGER WINDSHAL BANK	FOR SAVINGS
Signature(s) of Debtor(s)		Signature(s) of Secured Partylies)	
Signature(s) of Debtor(s) (necessary only if it	em 9 is applicable)	Signature(s) of Secured Party(ies)	· · · · · · · · · · · · · · · · · · ·
Type Name of Individual or Business		Type Name of Individual or Business	
(1) FILING OFFICER COPY - ALPHABETICAL (3) F	ILING OFFICER COPY-ACKNOWLEDGEMENT	STANDARD FORM — UNIF (5) FILE COPY DEBTOR(S) Approved by T	ORM COMMERCIAL CODE — FORM UCC- he Secretary of State of Alabama