

STATE OF ALABAMA — UNIFORM COMMERCIAL CODE — FINANCING STATEMENT FORM UCC-1 ALA.

28532

Important: Read Instructions on Back Before Filling out Form.

REORDER FROM
Registre, Inc.
514 PIERCE ST.
P.O. BOX 218
ANOKA, MN, 55303
(612) 421-1713

<input type="checkbox"/> 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 filing pursuant to the Uniform Commercial Code.
1. Return copy or recorded original to: <div style="text-align: center;">CENTRAL STATE BANK P.O. BOX 180 CALERA, AL 35040</div>		<div style="transform: rotate(-90deg); font-weight: bold;">Inst # 1997-39997</div> <div style="transform: rotate(-90deg); font-weight: bold;">12/09/1997-39997</div> <div style="transform: rotate(-90deg); font-weight: bold;">09:58 AM CERTIFIED</div> <div style="transform: rotate(-90deg); font-weight: bold;">SHELBY COUNTY JUDGE OF PROBATE</div> <div style="transform: rotate(-90deg); font-weight: bold;">27.00</div> <div style="transform: rotate(-90deg); font-weight: bold;">001 MEL</div>
2. Name and Address of Debtor (Last Name First if a Person) <div style="text-align: center;">RENE TOLLISON 2910 HWY 42 CALERA, AL 35040</div>		
Social Security / Tax ID # _____		
2A. Name and Address of Debtor (IF ANY) (Last Name First if a Person) <div style="text-align: center;">CENTRAL STATE BANK Highway 25 P.O. Box 180 Calera, Alabama 35040</div>		
Social Security / Tax ID # _____		FILED WITH: <div style="text-align: center;">SHELBY COUNTY JUDGE OF PROBATE</div>
<input type="checkbox"/> Additional debtors on attached UCC-E		
3. NAME AND ADDRESS OF SECURED PARTY (Last Name First if a Person) <div style="text-align: center;">CENTRAL STATE BANK Highway 25 P.O. Box 180 Calera, Alabama 35040</div>		
Social Security / Tax ID # _____		
<input type="checkbox"/> Additional secured parties on attached UCC-E		4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)

5. The Financing Statement Covers the Following Types (or items) of Property:

1977 14 X 66 PACER RUSSET MOBILE HOME SN #ALFRC1870651 A

5A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing:

Check X if covered: <input type="checkbox"/> Products of Collateral are also covered. 6. This statement is filed without the debtor's signature to perfect a security interest in collateral (check X, if so) <input type="checkbox"/> already subject to a security interest in another jurisdiction when it was brought into this state. <input type="checkbox"/> already subject to a security interest in another jurisdiction when debtor's location changed to this state. <input type="checkbox"/> which is proceeds of the original collateral described above in which a security interest is perfected. <input type="checkbox"/> acquired after a change of name, identity or corporate structure of debtor <input type="checkbox"/> as to which the filing has lapsed.	7. Complete only when filing with the Judge of Probate: The initial indebtedness secured by this financing statement is \$ <u>8,000.00</u> Mortgage tax due (15¢ per \$100.00 or fraction thereof) <u>27.00</u> 8. <input type="checkbox"/> This financing statement covers timber to be cut, crops, or fixtures and is to be cross indexed in the real estate mortgage records (Describe real estate and if debtor does not have an interest of record, give name of record owner in Box 5)
Signature(s) of Debtor(s) <div style="text-align: center;"> Renea Tallison </div>	Signature(s) of Secured Party(ies) (Required only if filed without debtor's Signature — see Box 6) <div style="text-align: center;"> Mary Baker </div>
Signature(s) of Debtor(s)	Signature(s) of Secured Party(ies) or Assignee <div style="text-align: center;">CENTRAL STATE BANK</div>
Type Name of Individual or Business	Type Name of Individual or Business