

# 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

<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:  <b>ALLINDER, DARRELL D.</b> <b>CEDAR GROVE MOBILE HOME PARK</b> <b>BOX 60</b> <b>MAYLENE AL 35114</b>  Pre-paid Acct. # <u>833290</u>		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office																				
2. Name and Address of Debtor (Last Name First if a Person)  <b>NAME AND ADDRESS SAME AS ABOVE</b>  Social Security/Tax ID # _____		<div style="writing-mode: vertical-rl; transform: rotate(180deg);">             Inst # 1998-03139              01/30/1998-03139              10:23 AM CERTIFIED              SHELBY COUNTY JUDGE OF PROBATE              001 SNA           </div>																				
2A. Name and Address of Debtor (IF ANY) (Last Name First if a Person)  <b>ROSS, RHONDA D.</b> <b>ADDRESS SAME AS ABOVE</b>  Social Security/Tax ID # _____																						
<input type="checkbox"/> Additional debtors on attached UCC-E																						
3. SECURED PARTY (Last Name First if a Person) <b>SOUTHRUST BANK, NA</b> <b>PO BOX 2465</b> <b>BIRMINGHAM AL 35201</b>  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. <input type="checkbox"/> This statement refers to original Financing Statement bearing File No. <u>27713</u> Filed with <u>JUDGE OF PROBATE OF SHELBY COUNTY</u> Date Filed <u>3-14-91</u> 19__																						
6. <input type="checkbox"/> Continuation. The original financing statement between the foregoing Debtor and Secured Party, bearing file number shown above, is still effective. 7. <input checked="" type="checkbox"/> Termination. Secured Party no longer claims a security interest under the financing statement bearing the file number shown above. 8. <input type="checkbox"/> Partial or <input type="checkbox"/> Full Assignment. The Secured Party's right under the financing statement bearing file number shown above to the property described in item 11 or to all of the property listed on this file, is assigned to the assignee whose name and address appears in item 4. 9. <input type="checkbox"/> Amendment. Financing statement bearing file number shown above is amended as set forth in item 11. 10. <input type="checkbox"/> Partial Release. Secured Party releases the collateral described in item 11 from the financing statement bearing file number shown above.																						
11. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing:  <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;">           Check X if covered: <input type="checkbox"/> Products of Collateral are also covered.         </div> <div style="width: 35%;"> <table border="1" style="width:100%; border-collapse: collapse;"> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </table> </div> </div>																						
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">           Signature(s) of Debtor(s)             Signature(s) of Debtor(s) (necessary only if item 9 is applicable)             Type Name of Individual or Business         </div> <div style="width: 50%;"> <div style="text-align: center;">               Signature(s) of Secured Party(ies)  <b>TRACY P. JILES — DOCS RELEASE CLERK</b>              Signature(s) of Secured Party(ies)  <b>SOUTHRUST BANK, NA</b>              Type Name of Individual or Business           </div> </div> </div>																						

11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing:


Check X if covered: ☐ Products of Collateral are also covered.

Signature(s) of Debtor(s)

Signature(s) of Debtor(s) (necessary only if item 9 is applicable)

Type Name of Individual or Business

Signature(s) of Secured Party(ies)

TRACY P. JILES — DOCS RELEASE CLERK

Signature(s) of Secured Party(ies)

SOUTHRUST BANK, NA

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