## 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.

REORDER FROM
Registré, Inc.
514 PIERCE ST.
P.O. BOX 216
A 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 pursuant to the Uniform Commercial Code	Filing Officer for
Return copy or recorded original to     CENTRAL STATE BANK		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	121 21 IED ME
POST OFFICE BOX 180 CALERA, ALABAMA 35040	0		3-0-8 -0-41 -0-11-11-11-11-11-11-11-11-11-11-11-11-1
Pre-paid Acct. #			1998 1998 7 JEE
2. Name and Address of Debtor	(Last Name First if a Person)		<b># こを書</b>
TODD MCCORD			+ <u>6</u> 5 2 2
61 PEAVINE TRAILER PAALABASTER, ALABAMA 35			Ins. 10:01 (新田)
Social Security/Tax (D #	Y) (Last Name First if a Person)		
Social Security/Tax ID #		FILED WITH:	
☐ Additional debtors on attached UCC-E		SHELBY COUNTY PROBATE J	UDGE
3. NAME AND ADDRESS OF SECURED PARTY) (	ast Name First if a Person)	4. ASSIGNEE OF SECURED PARTY (IF ANY	
CENTRAL STATE BANK POST OFFICE BOX 180 CALERA, ALABAMA 35040	)		
Social Security/Tax ID #			
☐ Additional secured parties on attached UCC-E			<u> </u>
5. This statement refers to original Financing Statement SHELBY COUNTY I		042 Date Filed06-20	19 95
7 Termination. Secured Party no longer claims  8 Partial or The Secured Party's right under  9 Full property described in item 11 or  Assignment whose name and address appears  9 Partial or The Secured Party no longer claims  7 The Secured Party no longer claims  7 The Secured Party no longer claims  7 The Secured Party no longer claims  8 Partial or The Secured Party no longer claims  9 Partial or The Secured Party no longer claims  8 Partial or The Secured Party no longer claims  9 Partial or The Secured Party no longer claims	s a security interest under the financing statemer the financing statement bearing file number of to all of the property fisted on this file, is assigned	shown above to the gned to the assignee the in item 11.	
11. 1978 HA LMARK 12 x 70 MOI	BILE HOME SERIAL NUMB	ER #0387	11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered
			By This Filing:
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		1 1.	
Check X if covered: Products of Collateral are	also covered.	- An 1 1/1/1	
Signature(s) of Debtor(s)	· <u>·</u>	Signature(s) of Secured Party(ies)  CENTRAL STATE BANK	
Signature(s) of Debtor(s) (necessary only if iter	n 9 is applicable)	Signature(s) of Secured Party(ies)	
Type Name of Individual or Business		Type Name of Individual or Business	
1.1	ING OFFICER COPY-ACKNOWLEDGEMENT & COPY - SECURED	(5) FILE COPY DEBTOR(S)  STANDARD FORM — Ut	NIFORM COMMERCIAL CODE FORM UCC- y The Secretary of State of Alabama

(2) FILING OFFICER COPY - NUMERICAL