

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.

Registered, Inc.
914 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, ALABAMA 35040 </div>		Pre-paid Acct. # _____		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office <div style="transform: rotate(-90deg); font-weight: bold; font-size: 1.2em;"> Inst # 1998-11537 </div> <div style="transform: rotate(-90deg); font-weight: bold; font-size: 1.2em;"> 04/08/1998 11:53 AM 08:39 AM CERTIFIED SHELBY COUNTY JUDGE OF PROBATE </div>	
2. Name and Address of Debtor (Last Name First if a Person) <div style="text-align: center;"> RHONDA G KLEIN P.O. BOX 512 CALERA, ALABAMA 35040 </div>		Social Security/Tax ID # _____			
2A. Name and Address of Debtor (IF ANY) (Last Name First if a Person) Social Security/Tax ID # _____		Social Security/Tax ID # _____			
<input type="checkbox"/> Additional debtors on attached UCC-E		FILED WITH: SHELBY COUNTY JUDGE OF PROBATE			
3. NAME AND ADDRESS OF SECURED PARTY (Last Name First if a Person) <div style="text-align: center;"> CENTRAL STATE BANK P.O. BOX 180 CALERA, ALABAMA 35040 </div>		4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person) Social Security/Tax ID # _____		<input type="checkbox"/> Additional secured parties on attached UCC-E	
5. <input type="checkbox"/> This statement refers to original Financing Statement bearing File No. 1997-13844 Filed With SHELBY COUNTY JUDGE OF PROBATE		Date Filed 05-05 , 19 97		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.		11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing:	

**1982 TROJAN 51 x 14 TAG# 45319 ID#0038
LOCATED IN SHELBY COUNTY**

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)

Signature(s) of Secured Party(ies)

CENTRAL STATE BANK
Type Name of Individual or Business