

**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**

**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;"> <b>CENTRAL STATE BANK</b>  <b>P.O. BOX 180</b>  <b>CALERA, ALABAMA 35040</b> </div>		<div style="writing-mode: vertical-rl; transform: rotate(180deg);">             Inst # 1990-11574              04/22/1990-11574              09:17 AM CERTIFIED              SHELBY COUNTY JUDGE OF PROBATE           </div>
Pre-paid Acct. # _____ 2. Name and Address of Debtor (Last Name First if a Person)  <div style="text-align: center;"> <b>DR. C C TAMBORREL</b>  <b>P.O. BOX 253</b>  <b>SHELBY, ALABAMA 35143</b> </div>		
Social Security/Tax ID # _____ 2A. Name and Address of Debtor (IF ANY) (Last Name First if a Person)  <div style="text-align: center;"> <b>EUNICE L TAMBORREL</b>  <b>P.O. BOX 253</b>  <b>SHELBY, ALABAMA 35143</b> </div>		
Social Security/Tax ID # _____ <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;"> <b>CENTRAL STATE BANK</b>  <b>P.O. BOX 180</b>  <b>CALERA, ALABAMA 35040</b> </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)  <div style="text-align: center;"> <b>SHELBY COUNTY JUDGE OF PROBATE</b> </div>		FILED WITH: _____ 5. <input type="checkbox"/> This statement refers to original Financing Statement bearing File No. <u>1997-29699</u> Filed with <u>SHELBY COUNTY JUDGE OF PROBATE</u> Date Filed <u>09-16</u> , 19 <u>97</u>
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 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.		

**1996 FLEETWOOD MOBILE HOME**  
**VIN# TNFLS 25A43325RL11**

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 Secured Party(ies)

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

Signature(s) of Secured Party(ies)  
**CENTRAL STATE BANK**

Type Name of Individual or Business

Type Name of Individual or Business