## 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.

Registré, In 514 PIERCE ST. P.O. BOX 218 ANOKA, MN. 55303 (612) 421-1713

| ☐ The Debtor is a transmitting utility   | No. of Additional  | This FINANCING STATEMENT is pro-   | esented to a Filing Officer for   |
|--|--|--|---|
| as defined in ALA CODE 7-9-105(n).  1. Return copy or recorded original to   | Sheets Presented:  | filing pursuant to the Uniform Comm THIS SPACE FOR USE OF FILING OFFICER | · · · · · · · · · · · · · · · · · · ·   |
| neturn copy or recorded original to  |  | Date, Time, Number & Filing Office                                       | A DHE   |
| CENTRAL STATE BANK   |  |  | in Sure   |
| P.O. BOX 180   |  |  | m m H   |
| CALERA, AL 35040   |  | -  |   |
| GALERA, AL 33040   |  |  | <b>9                                    </b>  |
|  |  |  | الله الله الله الله الله الله الله الله   |
|  |  | -  | て た 돌 デ   |
| Pre-paid Acct. #   | () act Name First if a Parson)   |  | 4 2 3   |
| Name and Address of Debtor   | (Last Name First if a Person)  |  | サー で名誉  |
| CHARLES W. DAVENPO   | RT   |  | が の 一端  |
| P.O. BOX 56  |  |  |   |
| SHELBY, AL 35143   |  |  | ميا<br>   |
|  |  |  |   |
|  |  |  | •   |
|  |  |  |   |
| Social Security/Tax ID #(E.ANX)  | (Leat Name First if a Resear)  |  |   |
| 2A. Name and Address of Debtor (IF ANY)  | (Last Name First if a Person)  |  |   |
| SUE DAVENPORT  |  |  |   |
| P.O. BOX 56  |  |  |   |
|  |  |  |   |
| SHELBY, AL 35143   |  |  |   |
|  |  | •  |   |
| -  |  | <u></u>  |   |
| Social Security/Tax ID #   | <i></i>  | FILED WITH: SHELBY COUNTY  | JUDGE OF PROBATE  |
| ☐ Additional debtors on attached UCC-E   |  | CENTRAL STATE  | <del>n∧N</del> K  |
| 3. NAME AND ADDRESS OF SECURED PARTY) (Last  | Name First if a Person)  | 4. ASSIGNEE OF SECURED PARTY   | (IF ANY) (Last Name First if a Person)  |
|  |  | · ·  |   |
| CENTRAL STATE BANK   | •  | •  |   |
| P.O. BOX 180   |  |  |   |
| CALERA, AL 35040   |  |  |   |
|  |  |  |   |
| Social Security/Tax ID #   | <u></u>  | _  |   |
| ☐ Additional secured parties on attached UCC-E   |  |  |   |
|  | 1992-167   | 6.9  |   |
| 5. This statement refers to original Financing Statement   | ent bearing File No. <u>エクフムーエリル</u><br>D A N IZ   |  | 19 98   |
| Filed with CENTRAL STATE   |  |  |   |
| 6. Continuation. The original financing statement bet  | tween the foregoing Debtor and Secured P<br>scurity interest under the financing stateme |  | effective.  |
|  | financing statement bearing file number st   |  |   |
| ☐ Full property described in item 11 or to a   | all of the property listed on this file, is assig  |  |   |
| Assignment, whose name and address appears in 9. Amendment Financing statement bearing file nur  | n item 4.<br>mber shown above is amended as set forth                                    | in item (11.   |   |
| 10. ☐ Partial Secured Party releases the collatera   | al described in item 11 from the financing s   | tatement bearing file  |   |
| Release number shown above.  |  | · · · · · · · · · · · · · · · · · · ·                                    |   |
| <b>11</b> .  |  |  |   |
| 1988 SUNHSINE 28   | X 56 MORTLE HOM  | E SERTAL #2247   | 11A. Enter Code(s) From<br>Back of Form That  |
| 1300 BONNBIND 20   | 21 JO HOBIEL HOL   | DDRIID #2241   | Best Describes The<br>Collateral Covered  |
|  |  |  | By This Filling:  |
|  |  |  | <del></del>   |
|  |  |  |   |
|  |  | •  | _ <b></b>   |
| •  |  |  |   |
| -  |  |  | <del></del> <del> </del> <del></del> <del></del> <del></del> <del></del> <del></del> <del> </del> <del> <del> </del> <del> </del></del> |
|  |  |  |   |
| 3  |  |  | <u> </u>  |
| Check X if covered: Products of Collateral are also  | covered.   | - A  |   |
|  |  | 1/1/2/1/   | 2/1-  |
|  |  | 1/ary  | iyu   |
| Signature(s) of Debtor(s)  |  | Signature(s) of Secured Party(ies)                                       |   |
| Signature(s) of Debtor(s) (necessary only if item 9 is   | apolicable)  | Signature(s) of Secured Party(ies)                                       |   |
| organization of the proportion of the present in the present of th | . approvery  | CENTRAL STATE  | BANK  |
| Type Name of Individual or Business  |  | Type Name of Individual or Busine  | 955   |