STATE OF ALABAMA — UNIFORM COMMERCIAL CODE STATEMENTS OF CONTINUATION, PARTIAL RELEASE, ASSIGNMENT, ETC. — FORM UCC-3

27793

Important: Read Instructions on Back Before Filling out Form.

REORDEH FROM

Registre, Inc.
514 PIERCE ST.
P.O. BOX 218
ANOKA, MN. 55363
(612) 421-1713

☐ The Debtor is a transmitting utility	No. of Additional Sheets Presented:	This FINANCING STATEMENT is p	resented to a Filing Offi mercial Code	icer for
as defined in ALA CODE 7-9-105(n). Fleturn copy or recorded original to	OHOUS FICOURAGE.	THIS SPACE FOR USE OF FILING OFFICER		<u> </u>
FIRST FEEDAL SAVINGS P. O. Box 340 Bessener, AL 35011 Pre-poid Acct * 744542	BANK	Date, Time, Number & Filing Office	9E991-6	RTIFIED RTIFIED RF PROMIE BF PROMIE
CAMP, George E. 119 Cedar Bend Dr. Helena, AL 35080 Social Security/Tax 40 4. 2A. Name and Address of Debtor (IF ANY)	(Last Name First if a Person)		1999	COS 49 AM CE COS 49 AM CE WELN COUNTY JUST COL ME
Social Security/Ten 10 #		FILED WITH:		
Additional debiors on attached UCC-E NAME AND ADDRESS OF SECURED PARTY) (Last Na		4. ASSIGNEE OF SECURED PARTY	(IF ANY)	(Last Name First if a Person)
1630 Fourth Avenue No Bessemer, Alabama 350 Social Security/Tax iD # Additional secured parties on attached UCC-E				
5. This statement refers to original Financing Statement	t bearing File No. Inst. # 1	997 / 21301	Q Q	7
Filed with Judge of Probate of	of Shelby County	Date Filed JULY		<u></u>
Full property described in item 11 or to all Assignment whose name and address appears in 9. Amendment Financing statement bearing file numbers.	urity interest under the financing statement bearing file number of the property listed on this file, is assigned.	ent bearing the file number shown above. shown above to the gned to the assignee th in item 11.		A. Enter Code(s) From Back of Form That Best Describes The Collegeral Covered
				By This Filing: 6 0 0
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Check X if covered: Products of Colleteral are also co	overed.			
		FIRST FEDERAL SAV	TINKS RANK	
Signature(s) of Debtor(s)		Signature(s) of Secure Pertures		 · . ·
Signature(s) of Debtor(s) (necessary only if item 9 is a	pplicable)	By Signature of Secured Partyles) Its	<u> </u>	<u> </u>
Type Name of Individual or Business (1) FIUNG OFFICER COPY - ALPHABETICAL (3) FILING OFFI	CER COPY-ACKNOWLEDGEMENT	Type Name of Individual or Busin STANDARD		MMERCIAL CODE — FORM UCC-3