

1. Return copy or recorded original to

CENTRAL STATE BANK
P.O. BOX 180
CALERA, AL 35040

Pre-paid Acct. #

2. Name and Address of Debtor

(Last Name First if a Person)

Milledge, Calvin J.
Milledge, Reeda
Route 1 Box 206
Calera, AL 35040

Social Security/Tax ID #

2A. Name and Address of Debtor

(IF ANY)

(Last Name First if a Person)

Shoemaker, Timothy
Rt 1 Box 3118
Shelby, AL 35143

Social Security/Tax ID #

☐ Additional debtors on attached UCC-E

3. NAME AND ADDRESS OF SECURED PARTY (Last Name First if a Person)

Southtrust Bank, NA
P.O. Box 2465
Birmingham, AL 35201

Social Security/Tax ID #

☐ Additional secured parties on attached UCC-E5. ☒ This statement refers to original Financing Statement bearing File NoFiled with Shelby County

822257

THIS SPACE FOR USE OF FILING OFFICER
Date, Time, Number & Filing Office

FILED WITH:

SHELBY COUNTY JUDGE OF PROBATE

4. NAME AND ADDRESS OF ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)

Date Filed 20th Feb 89 19

6. ☐ Continuation. The original financing statement between the foregoing Debtor and Secured Party, bearing file number shown above, is still effective
7. ☒ Termination. Secured Party no longer claims a security interest under the financing statement bearing the file number shown above
8. ☐ 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. ☐ Amendment. Financing statement bearing file number shown above is amended as set forth in item 11
10. ☐ Partial
Release. Secured Party releases the collateral described in item 11 from the financing statement bearing file number shown above.

11.

1989 NEW SOUTHRIDGE MOBILE HOME SN#2530A & 2530B

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 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)

Type Name of Individual or Business

(1) FILING OFFICER COPY - ALPHABETICAL
(2) FILING OFFICER COPY - NUMERICAL(3) FILING OFFICER COPY - ACKNOWLEDGEMENT
(4) FILE COPY - SECURED PARTY

(5) FILE COPY DEBTOR(S)

STANDARD FORM — UNIFORM COMMERCIAL CODE — FORM UCC-3
Approved by The Secretary of State of Alabama

Inst # 1999-20627

05/17/1999-20627
10:03 AM CERTIFIED
SHELBY COUNTY JUDGE OF PROBATE
001 MEL