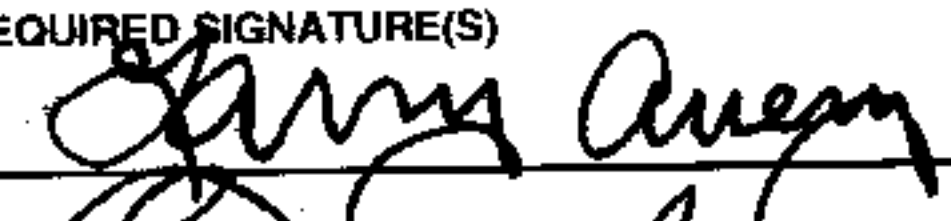



NATIONAL FINANCING STATEMENT (FORM UCC1) (TRANS) (REV. 12/18/95)
IMPORTANT - READ INSTRUCTIONS BEFORE FILLING OUT FORM - DO NOT DETACH STUB

THIS SPACE FOR USE OF FILING OFFICER

FINANCING STATEMENT - FOLLOW INSTRUCTIONS CAREFULLY

This Financing Statement is presented for filing pursuant to the Uniform Commercial Code and will remain effective, with certain exceptions, for 5 years from date of filing.

A. NAME & TEL. # OF CONTACT AT FILER (optional)		B. FILING OFFICE ACCT. # (optional)		
C. RETURN COPY TO: (Name and Mailing address) Associates Housing Finance, LLC P.O. Box 22008 Tampa, FL 33622-2008				
D. OPTIONAL DESIGNATION (if applicable): <input type="checkbox"/> LESSOR/LESSEE <input type="checkbox"/> CONSIGNOR/CONSIGNEE <input type="checkbox"/> NON-UCC FILING				
2. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b)				
OR	1a. ENTITY'S NAME			
	1b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX AVERY, LARRY			
1c. MAILING ADDRESS		CITY	STATE	COUNTRY POSTAL CODE
1d. S.S. OR TAX I.D.#	OPTIONAL ADDN'L INFO RE ENTITY DEBTOR:	1e. TYPE OF ENTITY	1f. ENTITY'S STATE OR COUNTRY OF ORGANIZATION	
			1g. ENTITY'S ORGANIZATIONAL I.D.#, if any <input type="checkbox"/> NONE	
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b)				
OR	2a. ENTITY'S NAME			
	2b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX			
2c. MAILING ADDRESS		CITY	STATE	COUNTRY POSTAL CODE
2d. S.S. OR TAX I.D.#	OPTIONAL ADDN'L INFO RE ENTITY DEBTOR:	2e. TYPE OF ENTITY	2f. ENTITY'S STATE OR COUNTRY OF ORGANIZATION	
			2g. ENTITY'S ORGANIZATIONAL I.D.#, if any <input type="checkbox"/> NONE	
3. SECURED PARTY'S (ORIGINAL S/P or ITS TOTAL ASSIGNEE) EXACT FULL LEGAL NAME - insert only one secured party name (3a or 3b)				
OR	3a. ENTITY'S NAME			
	3b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX			
3c. MAILING ADDRESS		CITY	STATE	COUNTRY POSTAL CODE
4010 Boy Scout Boulevard, Suite 500		Tampa	FL	
4. This FINANCING STATEMENT covers the following types or items of property: All goods, fixtures, special order materials and accessions and deletions thereto whether affixed to the realty or otherwise: and all warranties and rights pertaining thereto located on the real property located in SHELBY County, Alabama, and being more particularly described as follows: LOCATED IN THE COUNTY OF SHELBY, STATE OF ALABAMA, AND DESCRIBED AS FOLLOWS: COMMENCE AT THE SW CORNER OF THE NE 1/4 OF THE SW 1/4 OF SECTION 31, TOWNSHIP 20 SOUTH, RANGE 2 EAST; THENCE RUN EAST ALONG SAID 1/4-1/4 LINE A DISTANCE OF 169.05 FEET TO THE POINT OF BEGINNING; THENCE CONTINUE ALONG LAST DESCRIBED CORNER A SEE ADDENDUM (UCC1ad) ATTACHED HERETO AND MADE A PART HEREOF				
5. CHECK BOX if applicable <input type="checkbox"/> This FINANCING STATEMENT is signed by the Secured Party instead of the Debtor to perfect a security interest (a) in collateral already subject to a security interest in another jurisdiction when it was brought into this state, or when the debtor's location was changed to this state, or (b) in accordance with other statutory provisions (additional data may be required)			7. If filed in Florida (check one) <input type="checkbox"/> Documentary stamp tax paid <input type="checkbox"/> Documentary tax not applicable	
6. REQUIRED SIGNATURE(S)  			8. <input checked="" type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) or recorded in the REAL ESTATE RECORDS Attach Addendum (if applicable)	
			9. Check to REQUEST SEARCH CERTIFICATE(S) on Debtor(s) (ADDITIONAL FEE) (optional) <input type="checkbox"/> All Debtors <input type="checkbox"/> Debtor 1 <input type="checkbox"/> Debtor 2	

Inst # 1999-22569
05/28/1999-22569
02:29 PM CERTIFIED
SHELBY COUNTY JUDGE OF PROBATE
002 NMS 16.00

FINANCING STATEMENT ADDENDUM - FOLLOW INSTRUCTIONS

THIS SPACE FOR USE OF FILING OFFICER

AdA. NAME OF FIRST DEBTOR ON RELATED FINANCING STATEMENT

OR	ENTITY'S NAME		
	INDIVIDUAL'S LAST NAME AVERY, LARRY	FIRST NAME	MIDDLE NAME, SUFFIX

Inst # 1999-22569

05/28/1999-22569
02:29 PM CERTIFIED
SHELBY COUNTY JUDGE OF PROBATE
16.00
002 MMS

Ad1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (Ad1a or Ad1b)

OR	Ad1a. ENTITY'S NAME			
	Ad1b. INDIVIDUAL'S LAST NAME AVERY, LULA	FIRST NAME	MIDDLE NAME	SUFFIX

Ad1c. MAILING ADDRESS		CITY	STATE	COUNTRY	POSTAL CODE
Ad1d. S.S. OR TAX I.D.#	OPTIONAL ADDN'L INFO RE ENTITY DEBTOR:	Ad1e. TYPE OF ENTITY	Ad1f. ENTITY'S STATE OR COUNTRY OF ORGANIZATION		Ad1g. ENTITY'S ORGANIZATIONAL I.D.#, if any <input type="checkbox"/> NONE

Ad2. ADDITIONAL SECURED PARTY'S EXACT FULL LEGAL NAME - insert only one name (Ad2a or Ad2b)

OR	Ad2a. ENTITY'S NAME				
	Ad2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
Ad2c. MAILING ADDRESS		CITY	STATE	COUNTRY	POSTAL CODE

- Ad3a. ☐ This FINANCING STATEMENT covers timber to be cut, minerals, or mineral-related accounts, or is filed as a fixture filing.
- Ad3a. ☐ This FINANCING STATEMENT covers crops growing or to be grown on the real estate described below.

Ad4. Description of real estate:

Ad7. Additional collateral description:

DISTANCE OF 403.00 FEET TO THE RIGHT OF WAY OF STATE HWY. 25; THENCE TURN AN ANGLE OF 68 DEGREES 43 MINUTES 36 SECONDS LEFT AND RUN ALONG SAID RIGHT OF WAY A DISTANCE OF 232.11 FEET; THENCE TURN AN ANGLE OF 111 DEGREES 16 MINUTES 24 SECONDS LEFT AND RUN A DISTANCE OF 403.00 FEET; THENCE TURN AN ANGLE OF 68 DEGREES 43 MINUTES 36 SECONDS LEFT AND RUN A DISTANCE OF 232.11 FEET TO THE POINT OF BEGINNING. ACCORDING TO THE SURVEY OF RODNEY SHIFLETT, DATED MARCH 2, 1999.

Ad5. Name and address of a RECORD OWNER of above-described real estate (if Debtor does not have a record interest):

Ad8. ☐ Debtor is a TRANSMITTING UTILITY (if applicable)

Ad6. REQUIRED SIGNATURE