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

The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n).	No. of Additional Sheets Presented: <b>0</b>	This FINANCING STATEMENT is presented to a Filing pursuant to the Uniform Commercial Code.	g Officer for	
CT Corpor Attn: Lo 49 Stevens	RETURN TO: ration System la Oduniami son St. Ste. 300 isco, CA 94105 874-8820  (Last Name First if a Person)	THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	Inst * 1999-25680	10:08 AM CERTIFIED , 10:00 SELEGION JUNE OF PROBRIE
Social Security / Tax ID #		FILED WITH:	<del></del>	
Additional debtors on attached USCX	<u></u>	Shelby		
SECURITY PACIFIC HOUS P.O. BOX 385000 BIRMINGHAM, AL 35238-  Social Security / Tax (D #	5000			•
. X: This statement refers to original Financing S	Statement bearing File No. 018206		<u></u>	
Filed with Shelby		Date Filed <u>9/24/87</u>		
Partial or The Secured Party no longer claim  Partial or The Secured Party's right or property described in item Assignment. Whose name and address a Amendment Financing statement bearing Secured Party releases the Release number shown above.  Termination: The secured Party releases the number shown above.	ms a security interest under the financing statemender the financing statement bearing file number statement on this file, is assurppears in item 4.  If the number shown above is amended as set forth collateral described in item 11 from the financing statement of the property is a longer of the collateral described in item 11 from the financing statement.	hown above to the signed to the assignee in item 11.	11A. Enter Code(s) F Back of Form Ti Best Describes	hat
			Collateral Covers By This Filing:  1 0 3	
1677642-92	-			
heck X if covered: Products of Coltateral are al				
		SECURITY PACIFIC HOUSING SE	RVICES INC	7
		Hober Len		
Signature(s) of Debtor(s)	<u></u>	Signature(s) of Secured Party es) Robert Lepin, Authorized Ag	gent	
Type Name of Individual or Business		Type Name of Individual or Business	··	
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		STANDARD FORM — UNIFORM CO Approved by The Secretary of	MMERCIAL CODE F State of Alabama	ORM UCC-3