STATE OF ALABAMA — UNIFORM COMMERCIAL CODE STATEMENTS OF CONTINUATION, PARTIAL RELEASE, ASSIGNMENT, ETC.

15233

Important: Read Instructions on Back Before Filling out Form.

ne Debtor is a transmitting utility No. of Additional Sheets Presented:	This FINANCING STATEMENT is presented to a Fill filling pursuant to the Uniform Commercial Code.	THE CHILDER TO
leturn copy or recorded original to	THIS SPACE FOR USE, OF FILING OFFICER Date, Time, Number & Filing Office	
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FIRST NATIONAL AMERICA'S BANK		
P.O. DRAWER 630	-	6 6 1
SYLACAUGA, AL 35150		
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Pre-paid Acct #		
Name and Address of Debtor (Last Name First if a Person)		an are
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124 GALLOPS CROSSROADS		#。艾麦薯葱
HARPERSVILLE, AL 35078		
Social Security / Tax ID #	-	i de Si
Name and Address of Debtor (IF ANY) (Last Name First if a Person)		
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ORGILL, BENJAMIN		
124 GALLOPS CROSSROADS		•
HARPERSVILLE, AL 35078		
	FILED WITH:	
ocial Security/Tax tD #		
dditional debtors on attached UCC-E	4 ASSIGNEE OF SECURED PARTY (IF ANY)	(Last Name First if a Person)
AME AND ADDRESS OF SECURED PARTY) (Last Name First if a Person)	4. ASSIGNEE OF SECURED PARTY (IF ANY)	,,
FIRST NATIONAL AMERICA'S BANK		·
P.O. DRAWER 630	;]	
SYLACAUGA, AL 35150		
SILACAOGA, AL SSISO		
Social Security/Tax ID #		
Additional secured parties on attached UCC-E		
	390	
This statement refers to original Financing Statement bearing File No 1998-053	Date Filed 02-18	19 99
Filed with SHELBY COUNTY		
Continuation. The original financing statement between the foregoing Debtor and Secured Termination. Secured Party no longer claims a security interest under the financing state	ment bearing the file number shown above.	•
Partial or The Secured Party's right under the financing statement bearing file number	er shown above to the	
Full property described in item 11 or to all of the property listed on this file, is as: Assignment, whose name and address appears in item 4.		
Amendment Financing statement bearing file number shown above is amended as set for	orth in item 11 in statement bearing file	
Partial Secured Party releases the collateral described in item 11 from the financing Release number shown above.		<u>.</u>
		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.		
	West Kninket	
Signature(s) of Debtor(s)	Signature(s) o Secured Part (es)	· · · · · · · · · · · · · · · · · · ·
OiBriginie/a) or Deprorta)		<u> </u>
Signature(s) of Debtor(s) (necessary only if item 9 is applicable)	Signature(s) of Secured Party(ies)	
Type Name of Individual or Business	Type Name of Individual or Business	
ILING OFFICER COPY - ALPHABETICAL (3) FILING OFFICER COPY-ACKNOWLEDGEMENT	STANDARD FORM — UNIF	ORM COMMERCIAL CODE — FORM UCC he Secretary of State of Alabama
ING OFFICER COPY NUMERICAL (4) FILE COPY - SECURED	(5) FILE COPY DEBTOR(S) Approved by 1	

(2) FILING OFFICER COPY - NUMERICAL

(4) FILE COPY - SECURED