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

Important: Read Instructions on Back Before Filling out Form.

		This DINIANGUNG STATEMENT is a	recented to a Films O	fficer for
The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n).	No. of Additional Sheets Presented:	This FINANCING STATEMENT is p filing pursuant to the Uniform Com	mercial Code	micer (O)
Return copy or recorded original to	*	THIS SPACE FOR USE OF FILING OFFICES Date, Time, Number & Filing Office	н	
REGIONS BANK	. •			
P.O. BOX 4897 MONTGOMERY, AL 36103		! !		
FIUNIGUMENI, AL JUIUJ	•			
		:		a
Pre-paid Acct. #	•			オール
Name and Address of Debtor	(Last Name First if a Person).		i U	M L E
F & G SPECIALTY FOODS,	INC.		Q	4 F R 2
1921 SEATTLE SLEW DR.			<u>,</u>	
HELENA, AL 35080			ğ	
		; 	ģ	O Z E S
		•	# 1	, O S
Social Security / Tax ID #	NY) (Last Name First if a Person)	-	ب	
			S. S.	6.5
			j i	→
		: : :		
		₹ 		•
Social Security/Tex ID #				
☐ Additional debtors on attached UCC-E				
SECURED PARTY (Last Name First if a Person)		4. ASSIGNEE OF SECURED PARTY	(IF ANY)	(Last Name First if a Person)
	X BYNKX			
SHELBY COUNTY BANK 124 MARKET CENTER DR.		• !		
ALABASTER, AL 35007		•		
Social Security/Tax ID #				
☐ Additional secured parties on attached UCC-E		⊣ :		
	· · · · · · · · · · · · · · · · · · ·	95-28455	·=··	
5XX This statement refers to original Financing St SHELBY COU	NTY	Date Filed JULY	13 ,91	5
8. Partial or The Secured Party's right und property described in item 11 statement. Assignment whose name and address app. 9. Amendment Financing statement bearing for Secured Party releases the control of the secured Party is right under the secured Party's right under the secured Party is right.	is a security interest under the financing stateme ler the financing statement bearing file number s or to all of the property listed on this file, is assig	ent bearing the file number shown above shown above to the gned to the assignee that item 11	effective	
Release number shown above.	<u>. </u>		. <u> </u>	<u> </u>
			- ¹	1A Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing:
				· — — — — — — —
•				
·				
Check X if covered: X Products of Colla	ateral are also covered.			
		Sain A M	vad max	
FILED WITHOUT DEBTORS Signature(s) of Debtor(s)	Signature	Signature(s) of Secured Party(ies)	HUY	<u> </u>
	·	REGIONS BANK F/K/A	SEELBY CO	DUNTY BANK
Signature(s) of Debtor(s) (necessary only if ite	m 9 is applicable)	Signature(s) of Secured Party(les)		
Type Name of Individual or Business	<u></u>	Type Name of Individual or Busine		DAMESON CODE FORM CO
	LING OFFICER COPY — ACKNOWLEDGEMENT LE COPY — SECOND PARTY(S)	STANDARD (5) FILE COPY DEBTOR(S)	TURM — UNIFORM C0 Approved by The Secri	OMMERCIAL CODE — FORM UCC-: etary of State of Alabama

LON-188-RGAL-11/96