

Important: Read Instructions on Back Before Filling out Form.

☐ The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n).		No. of Additional Sheets Presented:		This FINANCING STATEMENT is presented to a Filing Officer for filing pursuant to the Uniform Commercial Code.	
1. Return copy or recorded original to REGIONS BANK P.O. BOX 4897 MONTGOMERY, AL 36103				THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	
Pre-paid Acct. # _____					
2. Name and Address of Debtor (Last Name First if a Person) SMYTH, GARY OGDEN 102 MOUNTAIN PKWY. MAYLENE. AL 35114-6048					
Social Security/Tax ID # _____					
2A. Name and Address of Debtor (IF ANY) (Last Name First if a Person)					
Social Security/Tax ID # _____					
☐ Additional debtors on attached UCC-E					
3. SECURED PARTY (Last Name First if a Person) FIRST ALABAMA BANK 200 INVERNESS CENTER DR. BIRMINGHAM, AL 35242-0000				4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)	
Social Security/Tax ID # _____					
☐ Additional secured parties on attached UCC-E					
☒ This statement refers to original Financing Statement bearing File No. 1995-16501					
Filed with SHELBY COUNTY Date Filed JUNE 23 19 95					
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.					
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.					
FILED WITHOUT DEBTORS SIGNATURE					
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) ERICA C. MAGDON REGIONS BANK F/K/A FIRST ALABAMA BANK					
Signature(s) of Secured Party(ies) _____					
Type Name of Individual or Business _____					
STANDARD FORM — UNIFORM COMMERCIAL CODE — FORM UCC-1 Approved by The Secretary of State of Alabama					