

200284 V# 380138 70.

STATE OF ALABAMA — UNIFORM COMMERCIAL CODE — FINANCING STATEMENT  
FORM UCC-1 ALA.

40976

**Important: Read Instructions on Back Before Filling out Form.**

REORDER FROM  
Register, Inc.  
514 PIERCE ST.  
P.O. BOX 218  
ANOKA, MN. 55203  
(612) 421-1713

<input type="checkbox"/> 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:			THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	
VENDOR CAPITAL GROUP 4191 FAYETTEVILLE ROAD RALEIGH, NC 27603			Inst # 2000-38458 11/06/2000-38458 10:28 AM CERTIFIED SHELBY COUNTY JUDGE OF PROBATE 001 HMB 15.00	
Pre-paid Acct. #				
2. Name and Address of Debtor (Last Name First if a Person)				
BIRMINGHAM HOSPITALITY CORPORATION 113 BAYBRIDGE DRIVE GULF BREEZE, FL				
Social Security/Tax ID #			FILED WITH:	
2A. Name and Address of Debtor (IF ANY) (Last Name First if a Person)			4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)	
VENDOR CAPITAL GROUP 4191 FAYETTEVILLE ROAD RALEIGH, NC 27603				
Social Security/Tax ID #				
<input type="checkbox"/> Additional debtors on attached UCC-E				
3. NAME AND ADDRESS OF SECURED PARTY (Last Name First if a Person)				
VENDOR CAPITAL GROUP 4191 FAYETTEVILLE ROAD RALEIGH, NC 27603				
Social Security/Tax ID #				
<input type="checkbox"/> Additional secured parties on attached UCC-E				
5. The Financing Statement Covers the Following Types (or items) of Property: 58 - FULL XL PS QUALITY SLEEPER MATTRESS/BOX SPRING SETS (53X80); 11 - QUEEN PS QUALITY SLEEPER MATTRESS/BOX SPRING SETS (60X80); 27 KING PS QUALITY SLEEPER MATTRESS/BOX SPRING SETS (76X80); 108 - 1 LINE PHONE W/DATA PORT MESSAGE LIGHT AND SPEAKER PHONE as described in Addendum I to Schedule 001 FOR MASTER LEASE# 1362-000 whether now existing or hereafter acquired, on or removed from Debtor's premises. This equipment installed in: HOLIDAY INN EXPRESS, 4627 HIGHWAY 280, BIRMINGHAM, AL 35245. All of the equipment herein or hereafter stated is leased to debtor by secured party, Debtor is contractually bound to cause any buyer of the premises upon which the equipment located to assume all of the debtor's obligations to secured party under the lease, without modification of the term and conditions thereof, which assumption is a condition precedent to any sale of such property.				
5A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing: 803				
Check X if covered: <input type="checkbox"/> Products of Collateral are also covered.				
6. This statement is filed without the debtor's signature to perfect a security interest in collateral (check X, if so) <input type="checkbox"/> already subject to a security interest in another jurisdiction when it was brought into this state. <input type="checkbox"/> already subject to a security interest in another jurisdiction when debtor's location changed to this state. <input type="checkbox"/> which is proceeds of the original collateral described above in which a security interest is perfected. <input type="checkbox"/> acquired after a change of name, identity or corporate structure of debtor <input type="checkbox"/> as to which the filing has lapsed				
7. Complete only when filing with the Judge of Probate: The initial indebtedness secured by this financing statement is \$ _____ Mortgage tax due (15¢ per \$100.00 or fraction thereof) \$ _____				
8. <input type="checkbox"/> This financing statement covers timber to be cut, crops, or fixtures and is to be cross indexed in the real estate mortgage records (Describe real estate and if debtor does not have an interest of record, give name of record owner in Box 5)				
Signature(s) of Debtor(s) Julian B. MacQueen, Pres.			Signature(s) of Secured Party(ies) (Required only if filed without debtor's Signature — see Box 6) Sharon Dunford Sharon Dunford	
Type Name of Individual or Business BIRMINGHAM HOSPITALITY CORPORATION			Type Name of Individual or Business VENDOR CAPITAL GROUP	