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

07145

Important: Read Instructions on Back Before Filling out Form.

REPROER FROM

☐ 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 filling pursuant to the Uniform Commercial Cod	a Filing Officer for
Return copy or recorded original to		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	
FIRST COMMERCIAL BANK		Date: Time: Namber & Filling Office	
P.O. BOX 11746	•		
BIRMINGHAM AL 35202			
			σ ₁
Pre-paid Acct. #			8 H 8 B
2. Name and Address of Debtor	(Last Name First if a Person)		
BEAVER CREEK PRESERVE	LLP		
C/O HARBAR CONSTRUCTI	ON COMPANY		
5502 CALDWELL MILL RO	AD		a Size E =
BIRMINGHAM AL 35243			* à £ 5
			4 7 8
Social Security/Tax ID #			13/3 13/3 SELBY
2A. Name and Address of Debtor (IF A)	NY) (Last Name First if a Person)	-	
Social Security/Tax ID #		FILED WITH:	
Additional debtors on attached UCC-E		SECRETARY OF STATE	· · · · · · · · · · · · · · · · · · ·
3. NAME AND ADDRESS OF SECURED PARTY) (Last Name First if a Person)		<u></u>	
FIRST COMMERCIAL BANK		4. NAME AND ADDRESS OF ASSIGNEE OF SECURED PARTY	(IF ANY) (Last Name First if a Person)
P.O. BOX 11746			
BIRMDINGHAM AL 35202			
Social Security/Tax tD #			
☐ Additional secured parties on attached UCC-E	······································		
	00 01050	<u> </u>	
5.XX This statement refers to original Financing Statement SECRETARY OF		01 00 00	
	*·····································	Date Filed_01-09-98	
Enter the second of the second	o a security interest under the financing statemen	arty, bearing file number shown above, is still effective.	· · · · · · · · · · · · · · · · · · ·
The Secured Party's right date	ir the linancing statement bearing file number sh	lown above to the	
	r to all of the property listed on this file, is assigned are in item 4.		
	e number shown above is amended as set forth i ateral described in item 11 from the financing sta	in item 11.	
Release number shown above.			
			·
PARTIAL RELEASE:			11A. Enter Code(s) From
LOT 91, ACCORDING TO 7			Back of Form That Best Describes The
		, IN THE PROBATE OFFICE	Collateral Covered By This Filing:
OF SHELBY COUNTY ALABA	AMA.	•	
			
			
Object with the second of the			
Check X if covered: Products of Collateral are a	ilso covered.		
· · · · · · · · · · · · · · · · · · ·			
Signature(s) of Debtor(s)	······································	Signature(s) of Secured Partyles)	
Signature(s) of Debtor(s) (necessary only if item (9 is applicable)	- In The	
		FIRST COMMERCIAL BANK	
Type Name of Individual or Business 1) FILING OFFICER COPY - ALPHABETICAL (3) FILING	3 OFFICER COPY - ACKNOWLEDGEMENT	Type Name of Individual or Business	
FILING OFFICER CORY MUMERICAL	A OF THOSE OF THE MONIYOWILLUGEMENT	STANDADD FORM	

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