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

60592

Important: Read Instructions on Back Before Filling out Form.

MONDERFROM
SIAPIERCE ST.

☐ 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 pursuant to the Uniform Commercial Code.	
Return copy or recorded original to		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	- · · · · · · · · · · · · · · · · · · ·
Central State Bank		į (	
P.O. Box 180			
Calera, Al 35040			
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Due maid to a H			
Pre-paid Acct. #  2. Name and Address of Debtor	(Łast Name First if a Person)		
Tim Mitchell			
1011 Jim's Place Alabaster, Al 35007			
Alabaster, Al 33007			は 変 生色
			* <u>``</u> = = =
Social Security/Tax ID #	<del></del>		S S S S
2A. Name and Address of Debtor (IF ANY)	(Last Name First if a Person)		10 10 10 10 10 10 10 10 10 10 10 10 10 1
			`
Social Security/Tax ID #		FILED WITH:	····
☐ Additional debtors on attached UCC-E		Shelby County Judge	of Probate
3. NAME AND ADDRESS OF SECURED PARTY) (Las	t Name First if a Person)	<u></u>	
		4 NAME AND ADDRESS OF ASSIGNEE OF SECURED PARTY	(IF ANY) (Last Name First if a Person)
Central State Bank			
P.O.Box 180			
Calera, Al 35040			
Social Security/Tax ID #			
☐ Additional secured parties on attached UCC-E			
5. This statement refers to original Financing States	ment bearing File No 1998-1698	4	······································
Filed with Shelby County Ju	_	Date Filed 05/08/1998	
8.  Partial or The Secured Party's right under the property described in item 11 or to Assignment. Whose name and address appears 9.  Amendment Financing statement bearing file not secured Party releases the collate Release number shown above.	security interest under the financing statement he financing statement bearing file number shot all of the property listed on this file, is assign	nt bearing the file number shown above.  nown above to the ned to the assignee in item 11.	
11			
1988 21'2050Capri Bay1 #T0548205 W/ 21' traile		W/4 Cylinder Volvo motor	11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filling:
		/ /	<del></del>
Check X if covered: Products of Collateral are als	o covered.		——————————————————————————————————————
		11/11/11	1111
Signature(s) of Debtor(s)		signature(s) of Secured Party(ies)	1/ ade
Signature(s) of Debtor(s) (necessary only if item 9 i	is applicable)	Signature(s) of Secured Party(ies	<u></u>
Type Name of Individual or Business	<del></del>	<u>Central State Bank</u>	
· No require or moraldial of Doziness		Type Name of Individual or Business	

(1) FILING OFFICER COPY ALPHARETICAL (2) FILING OFFICER CORY, ACKNOWLEDGEMENT