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

60611

(1) FILING OFFICER CORY ALPHARETICAL IN FILING OFFICER CORY ACKNOWLEDGENERIT

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

REORDER FROM
Registre, Inc.
514 PIERCE ST.
P.O. BOX 218
ANOKA, MN. \$5303
(612) 421-1713

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.
Return copy or recorded original to		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office
Central State Banl P.O. Box 180 Calera, Al 35040		
Pre-paid Acct. #		
2. Name and Address of Debtor  Ray Benson	(Last Name First if a Person)	16055 LEDSS FIFIED .00
13645 Hwy 42 Shelby, Al 35143 Social Security/Tax ID #		
2A. Name and Address of Debtor (IF ANY	(Last Name First if a Person)	3.2. *
Lola Benson 13645 Hwy 42 Shelby, Al 35143		òöööööööööööööööööööööööööööööööööööööö
Social Security/Tax ID #		FILED WITH:
Additional debtors on attached UCC-E  NAME AND ADDRESS OF SECURED PARTY) (Last Name First if a Person)		Shelby County Judge of Probate
P.O. Box 180 Calera, A1 35040  Social Security/Tax ID #		
5. This statement refers to original Financing State Filed withShe1by County .		Date Filed 09/08/2000
<ul> <li>6.  Continuation. The original financing statement</li> <li>7  Termination. Secured Party no longer claims a</li> <li>8.  Partial or The Secured Party's right under property described in item 11 or Assignment. Whose name and address appears</li> <li>9.  Amendment Financing statement bearing file</li> </ul>	between the foregoing Debtor and Secured Pa a security interest under the financing statement the financing statement bearing file number shot all of the property listed on this file, is assign	arty, bearing file number shown above, is still effective int bearing the file number shown above lown above to the led to the assignee in item 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 al	so covered.	
Signature(s) of Debtor(s)		Signature(s) of Secured Party(iss)
Signature(s) of Debtor(s) (necessary only if item 9 is applicable)		Signature(s) of Secured Party(ics) Central State Bank
Type Name of Individual or Business		Type Name of Individual or Business