

STATEMENTS OF CONTINUATION, PARTIAL RELEASE, ASSIGNMENT, ETC. — FORM UCC-3

Important: Read Instructions on Back Before Filling out Form.

REORDER FROM
Register, Inc.
514 PIERCE ST.
P.O. BOX 218
ANOKA, MN. 55303
(612) 421-1713☐ The Debtor is a transmitting utility
as defined in ALA CODE 7-9-105(n).No. of Additional
Sheets PresentedThis FINANCING STATEMENT is presented to a Filing Officer for
filing pursuant to the Uniform Commercial Code.

1. Return copy or recorded original to

STATES RESOURCES CORP
4848 S 131 ST
OMAHA NE 68137

Pre-paid Acct. #

2. Name and Address of Debtor

(Last Name First if a Person)

HAYES, BONNIE C
RTE 2 BOX 154
COLUMBIANA AL 35051

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. NAME AND ADDRESS OF SECURED PARTY (Last Name First if a Person)

GREEN TREE ACCEPTANCE, INC, SERVICER
P O BOX 3317
MONTGOMERY AL 36109

Social Security/Tax ID #

☐ Additional secured parties on attached UCC-E5. ☐ This statement refers to original Financing Statement bearing File No. 17006

Filed with SHELBY CO AL

FILED WITH:

SHELBY CO AL

4. ASSIGNEE OF SECURED PARTY (IF ANY)

(Last Name First if a Person)

STATES RESOURCES CORP
4848 S 131 ST
OMAHA NE 68137

Date Filed 5-5-87

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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 The Secured Party's right under the financing statement bearing file number shown above to the☒ Full property described in item 11 or to all of the property listed on this file, is assigned to the assignee

Assignment. 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 Secured Party releases the collateral described in item 11 from the financing statement bearing file

Release number shown above.

11.

11A. Enter Code(s) From
Back of Form That
Best Describes The
Collateral Covered
By This Filing:

602

801

803

Check X if covered: ☐ Products of Collateral are also covered.

Signature(s) of Debtor(s)

Signature(s) of Debtor(s) (necessary only if item 9 is applicable)

Type Name of Individual or Business

STATES RESOURCES CORP

Signature(s) of Secured Party(ies)

Signature(s) of Secured Party(ies)

DOUG BARTZATT, PRESIDENT

Type Name of Individual or Business

(1) FILING OFFICER COPY - ALPHABETICAL
(2) FILING OFFICER COPY - NUMERICAL(3) FILING OFFICER COPY-ACKNOWLEDGEMENT
(4) FILE COPY - SECURED

(5) FILE COPY DEBTOR(S)

STANDARD FORM — UNIFORM COMMERCIAL CODE — FORM UCC-3
Approved by The Secretary of State of Alabama