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

60639

Important: Read Instructions on Back Before Filling out Form.

REORDERS SEE THE

| ☐ The Debtor is a transmitting utility | No. of Additional | This FINANCING STATEMENT is presente | d to a Filipo Officer for | 4 | |
|---|--|---|-----------------------------|---|--|
| as defined in ALA CODE 7-9-105(n). 1. Return copy or recorded original to | Sheets Presented | THIS SPACE FOR USE OF FILING OFFICER | Code. | ÷ | 10.7 |
| Central State Bank P.O. Box 180 Calera, Al 35040 | | Date, Time, Number & Filing Office | | | LED |
| Pre-paid Acct * | (Last Name First if a Person) | | * * 2001-2 | 13/2001-242 | SA AN CERTIF |
| Social Security/Tax ID # | NY) (Last Name First if a Person) | | | 90 | # # # # # # # # # # # # # # # # # # # |
| Kay Johnson 405 County Rd 774 Montevallo, Al 35115 | | | | · • • • • • • • • • • • • • • • • • • • | , and the William Will |
| Social Security / Tax ID # | | FILED WITH: | | | ····· |
| Additional debtors on attached UCC-E 3. NAME AND ADDRESS OF SECURED PARTY) (Last Name First if a Person) | | Shelby County Judge of 4 NAME AND ADDRESS OF ASSIGNEE OF SECURED PA | | ast Name First | ıf a Person) |
| Central State Bank P.O. Box 180 Calera, Al 35040 Social Security/Tax ID # | | | | | |
| 5. This statement refers to original Financing S Filed with Shelby County 3 | statement bearing File No 1999-519 Judge of Probate | 017 Date Filed 12/20/199 | 99 | | - <u>-</u> - |
| 6. Continuation. The original financing statement. 7. XTermination. Secured Party no longer claim. 8. Partial or The Secured Party's right und property described in item 11. Assignment. whose name and address app. 9. Amendment Financing statement bearing for the property described in item 11. | ent between the foregoing Debtor and Secured Parts a security interest under the financing statement bearing file number shor to all of the property listed on this file, is assign | arty, bearing file number shown above, is still effective in bearing the file number shown above hown above to the ned to the assignee in item 11 | | | |
| • | | | Back o Best D Collate | Code(s) From of Form That escribes The eral Covered s Filing: | • |
| Check X if covered: Products of Collateral are Signature(s) of Debtor(s) | also covered. | Law | | 1- | |
| Signature(s) of Debtor(s) (necessary only if iter | n 9 is applicable) | Signature(s) of Secured Party(ies) | 7 | | |
| Type Name of Individual or Business | | Central State Bank Type Name of Individual or Business | | | |
| (4) FU INO OFFICER COOK AND | NO DESIGNED CODY ADVANCES FROM TO THE TOTAL THE TOTAL TO THE TOTAL TOT | - 77 | | | |