STATE OF ALABAMA — UNIFORM COMMERCIAL CODE STATEMENTS OF CONTINUATION, PARTIAL RELEASE, ASSIGNMENT, ETC. — FORM UCC-3 Important: Read Instructions on Back Before Filling out Form.

The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n). 1. Return copy or recorded original to	No. of Additional Sheets Presented:	This FINANCING STATEMENT is presented to a Filing Officer for filing pursuant to the Uniform Commercial Code.
Alabama Power Compare 600 North 18th Street Birmingham, AL. 3529		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office
Attn: Division Account	ing Services	
Pre-peid Acct.#		2924 3240 3876 3876 3876 3876 3876 3876 3876 3876
2. Name and Address of Debtor	(Last Name First if a Person)	
Eally Charles R.		مرز ا
109 Maple Street Maylene, AL 35114		2007 CE E
		# N X E
Social Security/Tax ID #		3.0.5 SELW SELW
A. Name and Address of Debtor (IF AN)	Y) (Last Name First if a Person)	
Ealy, Karen Lynn		H D Q
Ealy, Karen Lynn 109 Maple Street		
Maylene, AL 35114		
		-
On alat On a transport		
Social Security/Tex ID #		
Additional debtors on attached UCC-E SECURED PARTY (Last Name First if a Person)		
		4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Pers
Alabama Power Company 600 North 18th Street		AmSouth Bank of Alabama
Birmingham, AL. 35291-1135		Riverchase Center North Building 205
Attn: Division Accounting Services		Parkway Office Circle Hoover, Alabama 35244
Social Security/Tax ID #		
	1000 46000	
This statement refers to original Financing State Filed with Shelby County J	ment bearing File No. 1998-46983	
Continuation. The original financing statement b	Detween the foregoing Debtor and Secured De-	nty, bearing file number shown above, is still effective.
Partial or The Secured Party's right under the Full property described in Item 11 or to Assignment. Whose name and address appears — Amendment Financing statement bearing file n	he financing statement bearing file number sho	own above to the state of the s
		11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filling:
		
		——————————————————————————————————————
		
heck X if covered: Products of Collateral are also) Covered	<u> </u>
The state of the s		
Signature(s) of Debtor(s)	· · · · · · · · · · · · · · · · · · ·	Signature(s) of Secured Party(les)
Signature(s) of Debtor(s) (necessary only if item 9 is	applicable)	Signature(s) of Secured Party(ies)
Type Name of Individual or Business		AmSouth Bank of Alabama Type Name of Individual or Business
ILING OFFICER COPY — ALPHABETICAL (3) FILING OFFICER COPY — ACKNOWLEDGEMENT		rype Name of Individual or Business