INGRAM  1c. MAILING ADDRESS  PO BOX 1687; 20120 TURTLE POINT  1d. S.S. OR TAX I.D.#  OPTIONAL ADD'NL INFO RE ENTITY DEBTOR Individual  2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name  2a. ENTITY'S NAME  OR  2b. INDIVIDUAL'S LAST NAME  1c. TYPE OF ENTITY  Individual  Columbia  2a. ENTITY'S NAME  2b. INDIVIDUAL'S LAST NAME  1c. TYPE OF ENTITY  Individual  Columbia  Col	T NAME  VIN  VIN  LUMBIANA  ENTITY'S STATE COUNTRY OF GANIZATION  a or 2b)  ST NAME	MIDDLE  L STATE AL  1g. ENTI	COUNTRY  ITY'S ORGANI  NAME	POSTAL C.  35051-0	0000
DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b)  1a. ENTITY'S NAME  1b. INDIVIDUAL'S LAST NAME INGRAM  c. MAILING ADDRESS  O BOX 1687; 20120 TURTLE POINT  d. S.S. OR TAX I.D.#  OPTIONAL ADD'NL INFO RE ENTITY DEBTOR INDIVIDUAL'S LAST NAME  2a. ENTITY'S NAME  2b. INDIVIDUAL'S LAST NAME  2c. MAILING ADDRESS  C. ADD'NL INFO RE OF ENTITY ADD'NL INFO RE OF ENTITY DEBTOR INFO RE OF ENTITY SAME REGIONS BANK  3b. INDIVIDUAL'S LAST NAME  3c. MAILING ADDRESS  255 WEST COLLEGE STREET  4. This FINANCING STATEMENT covers the following types or items of property: 1996 Road Runner 16' Trailer Vin #48TSU162XTSO08132, 19	T NAME  VIN  LUMBIANA  ENTITY'S STATE COUNTRY OF GANIZATION  a or 2b)  ST NAME	STATE AL  1g. ENTI	COUNTRY  ITY'S ORGANI  NAME	POSTAL CONTRACTOR CONT	ODE  OOOO  D.#, if any  NO
Individual's Last Name  INGRAM  Ic. MAILING ADDRESS  P O BOX 1687; 20120 TURTLE POINT  Id. S.S. OR TAX I.D.#  OPTIONAL ADD'NL INFO RE ENTITY DEBTOR INDIVIDUAL'S LAST NAME  2a. ENTITY'S NAME  OR  2b. INDIVIDUAL'S LAST NAME  CC. MAILING ADDRESS  CD. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name  2c. MAILING ADDRESS  CD. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name  2b. INDIVIDUAL'S LAST NAME  CC. MAILING ADDRESS  CD. ADD'NL INFO RE ENTITY DEBTOR INDIVIDUAL'S LAST NAME  ADD'NL INFO RE ENTITY DEBTOR INDIVIDUAL'S LAST NAME  CR. ADD'NL INFO RE ENTITY DEBTOR INDIVIDUAL'S LAST NAME  CR. ADD'NL INFO RE ENTITY INDIVIDUAL'S LAST NAME  CR. ADD'NL	LUMBIANA ENTITY'S STATE COUNTRY OF SANIZATION a or 2b)  ST NAME	STATE AL  1g. ENTI	COUNTRY  ITY'S ORGANI  NAME	POSTAL CONTRACTOR CONT	ODE  OOOO  D.#, if any  NO
1b. INDIVIDUAL'S LAST NAME INGRAM  c. MAILING ADDRESS  C. O BOX 1687; 20120 TURTLE POINT  c. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name  2a. ENTITY'S NAME  2b. INDIVIDUAL'S LAST NAME  2c. MAILING ADDRESS  c. MAILING ADDRESS  c. MAILING ADDRESS  c. MAILING ADDRESS  c. SECURED PARTY'S (ORIGINAL S/P or ITS TOTAL ASSIGNEE) EXACT FULL LEGAL NAME  REGIONS BANK  3b. INDIVIDUAL'S LAST NAME  7c. MAILING ADDRESS  c. MAILING	LUMBIANA ENTITY'S STATE COUNTRY OF SANIZATION a or 2b)  ST NAME	STATE AL  1g. ENTI	COUNTRY  ITY'S ORGANI  NAME	POSTAL CONTRACTOR CONT	ODE  OOOO  D.#, if any  NO
C. MAILING ADDRESS  O BOX 1687; 20120 TURTLE POINT  C. D. S.S. OR TAX I.D.#  OPTIONAL ADD'NL INFO RE ENTITY DEBTOR Individual OIL  C. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name  2a. ENTITY'S NAME  2b. INDIVIDUAL'S LAST NAME  Cc. MAILING ADDRESS  Cd. S.S. OR TAX I.D.#  OPTIONAL ADD'NL INFO RE ENTITY OBTOR INFO RE ENTITY DEBTOR INFO RE ENTITY SHAME  REGIONS BANK  3b. INDIVIDUAL'S LAST NAME  Cc. MAILING ADDRESS  C	LUMBIANA ENTITY'S STATE COUNTRY OF SANIZATION a or 2b)  ST NAME	AL 1g. ENTI	NAME	35051-0	0000 D.#, if any NON
d. S.S. OR TAX I.D.#  OPTIONAL ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name  2a. ENTITY'S NAME  2b. INDIVIDUAL'S LAST NAME  2c. MAILING ADDRESS  C. SECURED PARTY'S (ORIGINAL S/P or ITS TOTAL ASSIGNEE) EXACT FULL LEGAL NAME  REGIONS BANK  3b. INDIVIDUAL'S LAST NAME  FINANCING STATEMENT covers the following types or items of property:  1996 Road Runner 16' Trailer Vin #4RTSU162XTS008132, 19	ENTITY'S STATE COUNTRY OF SANIZATION a or 2b) ST NAME	1g. ENTI	NAME	ZATIONAL I.	D.#, if any NOI
ADD'NL INFO RE ENTITY DEBTOR   Individual   OI  ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - Insert only one debtor name  2a. ENTITY'S NAME  2b. INDIVIDUAL'S LAST NAME  c. MAILING ADDRESS  d. S.S. OR TAX I.D.#  OPTIONAL 2e. TYPE OF ENTITY 2 ON INTERPRETATION OF A CONTROL OF A CO	a or 2b) ST NAME	<u> </u>			
SECURED PARTY'S (ORIGINAL S/P or ITS TOTAL ASSIGNEE) EXACT FULL LEG  3a. ENTITY'S NAME  REGIONS BANK  3b. INDIVIDUAL'S LAST NAME  c. MAILING ADDRESS  C. MAILING ADDRESS  C. This FINANCING STATEMENT covers the following types or items of property:  996 Road Runner 16' Trailer Vin #4RTSU162XTS008132, 19	ENTITY'S STATE COUNTRY OF SANIZATION	l 2g. ENT	COUNTRY ITY'S ORGAN	POSTAL C	
REGIONS BANK  3b. INDIVIDUAL'S LAST NAME  c. MAILING ADDRESS  255 WEST COLLEGE STREET  This FINANCING STATEMENT covers the following types or items of property: 1996 Road Runner 16' Trailer Vin #4RTSU162XTS008132, 19		party name (3a or 3b)			· · · · · · · · · · · · · · · · · · ·
30. INDIVIDUAL 3 LAST NAME  3c. MAILING ADDRESS  255 WEST COLLEGE STREET  4. This FINANCING STATEMENT covers the following types or items of property: 1996 Road Runner 16' Trailer Vin #4RTSU162XTS008132, 19		MIDDLE	NAME	<del></del>	SUFFIX
255 WEST COLLEGE STREET  1. This FINANCING STATEMENT covers the following types or items of property: 1996 Road Runner 16' Trailer Vin #4RTSU162XTS008132, 19	Υ	STATE	COUNTRY	POSTAL C	CODE
1996 Road Runner 16' Trailer Vin #4RTSU162XTS008132, 19	LUMBIANA	AL	<u> </u>	35051	
				in Florida (ch	neck one)
5. CHECK This FINANCING STATEMENT is signed by the Secured Party instead of t subject to a security interest in another jurisdiction when it was brought this state, or (b) in accordance with other statutory provisions (additional decorrect provisions).	to this state, or when the deptor	S rocation was changed	stamp	tax paid L	_tax not applicable
6. REQUIBED SIGNATURE(S)	a may be required]	[_	OF A TERRETAIN	i i is to be tile	ed [for record] DS [if applica
Kevin L. Ingram	a may be required]	8. This FINANCIN (or recorded) in Attach Addend	n the REAL EST	TATE RECOR	