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		NOTE# 8050	
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.	
BANCORPSOUTH BANK P.O. BOX 55338 2211 HIGHLAND AVENUE BIRMINGHAM, AL 35255	5–5338	THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	
Pre-paid Acct. #			1. F. 1. E. M. 1. E.
JOHN POWERS P.O.BOX 217 VANDIVER, AL 35176	(Last Name First if a Person)		8/2001-40 AM CERTI
Social Security/Tax ID #	NY) (Last Name First if a Person)		10:03 10:03
Social Security/Tax ID #			
BANCORPSOUTH, FORMELY P.O. BOX 55338 2211 HIGHLAND AVENUE BIRMINGHAM, AL 35255 Social Security/ Tax 10 # Additional secured parties on attached UCC-E	HIGHLAND BANK 5-5338	4. ASSIGNEE OF SECURED PARTY (IF ANY)	(Last Name First if a Person)
<u> </u>			
5. This statement refers to original Financing Statement SHELBY COUNTY		1	19_97
6. Continuation. The original financing stateme 7. Termination. Secured Party no longer claim 8. Partial or The Secured Party's right und Property described in item 11 and prop	int between the foregoing Debtor and Secured Pa is a security interest under the financing stateme or the financing statement bearing file number st or 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. Inown above to the hed to the assignee. In item 11.	· · · · · · · · · · · · · · · · · · ·
			11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filling:
Check V II sourced:			
Check X if covered: Products of Collateral are	BISO COVERED.	H. Hat Parlin In	
Signature(s) of Debtor(s)		Signature(s) of Secured Party(ies)	
Signature(s) of Debtor(s) (necessary only if item	n 9 is applicable)	Signature(s) of Secured Party(ies)	
Type Name of Individual or Business (1) FIUNG OFFICER COPY — ALPHABETICAL (3) Fill	NG OFFICER COPY — ACKNOWLEDGEMENT	Type Name of Individual or Business STANDARD FORM — UNIFOR	M COMMERCIAL CODE — FORM UCC-3