STATE OF ALABAMA — UNIFORM COMMERCIAL CODE STATEMENTS OF CONTINUATION, PARTIAL RELEASE, ASSIGNMENT, ETC. — FORM UCC-3

11453

Important: Read Instructions on Back Before Filling out Form.

The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n). Pre-poid Acct #_1062617 2. Name and Address of Debtor (Last Name First if a Person) Lawlev. James M 150 Creek Rd Montevallo. Al 35115 Social Security/Tax ID #	This Financing Statement is presented to a filling pursuant to the Uniform Commercial Cod Itiling Space FOR USE OF Filling Office Date, Time, Number & Filling Office Filled With:	GEN DWITT JUBE OF MOMILE
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Social Security/Tax ID #	FILED WITH:	
NAME AND ADDRESS OF SECURED PARTY) (Last Name First if a Person)		
· / (· · · · · · · · · · · · · · · · ·	4. NAME AND ADDRESS OF ASSIGNEE OF SECURED PARTY (IF ANY)	(Last Name First if a Pers
SouthTrust Bank		
P.O. Box 2465		
Birmingham, Al 35201		
Social Security/Tax ID #		
Additional secured parties on attached UCC-E		
This statement refers to original Financing Statement bearing File NoCOUNTY# 199	32827	
Filed will doe of Probate of Shelby County	11_14_0E	
Continuation. The original firrancing statement between the foregoing Debtor and Secured De-		
XXXXIII Delication. Secured Party no longer claims a security interest under the financing statement. Delication The Secured Party's right under the financing statement because the secured Party's right under the financing statement.	bearing the file number shown above, is still effective.	
Full property described in item 11 or to all of the property listed on this file is seeigned		
Assignment. whose name and address appears in item 4. Amendment Financing statement bearing file number shown above is amended as set forth in Secured Party releases the collateral described in its statement of this life, is assigned.		
- The condition of the condition of the figure of the figu	item 11. ement bearing file	
Release number shown above.		
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	11A. Enter	Code(s) From
	Back of	of Form That Describes The
	Collate	eral Covered is Filing:
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		-
		
Check X if covered: Products of Collateral are also covered.		- — — —
		- -
Signature(s) of Debtor(s)	_ 4TITAL - 1/12h	<u></u>
	Signature(s) of Secured Party(les)	_
Signature(s) of Debtor(s) (necessary only if item 9 is applicable)	Signature(s) of Secured Date (1)	
Type Name of Individual or Business	Signature(s) of Secured Party(ies) SouthTrust Bank	
ING OFFICER COPY - ALPHABETICAL (3) FILING OFFICER COPY - ACKNOWLEDGEMENT (4) FILE COPY - SECURED PARTY	Type Name of Individual or Business	······································

(5) FILE COPY DEBTOR(S)