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

11467

Important: Read Instructions on Back Before Filling out Form.

REORDER FROM

Registre, Inc.
514 PIERCE ST.
P.O. BOX 218
ANOKA MN. 55303
(612) 421-1713

The Debtor is a transmitting utility 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.	
Return copy or recorded original to		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	
			n m m m m m m m m m m m m m m m m m m m
Pre-paid Acct. # 842003			in Legal
2. Name and Address of Debtor	(Last Name First if a Person)		
Johnson. Henry T.			
PO Box 433	•		J GE
Greenbond Al 35074			る
			いると
Social Security / Tay ID #			
Social Security/Tax ID #	(Last Name First if a Person)		
			Ö
Johnson. Kathy J.			
SAME			
Social Security/Tax ID #		FILED WITH:	<del></del>
☐ Additional debtors on attached UCC-E			
3. NAME AND ADDRESS OF SECURED PARTY) (Last No	ame First if a Person)	4. NAME AND ADDRESS OF ASSIGNEE OF SECU	RED PARTY (IF ANY) (Last Name First if a Person)
SouthTrust Bank			
PO Box 2465			
Birmingham. Al 3520	<b>1</b>		
Social Security/Tax ID #			
☐ Additional secured parties on attached UCC-E	<del> </del>		
	C# 1/	007	<del></del>
5. This statement refers to original Financing Statement Filed with Judge of Probate of		097 Date Filed_1/15/87	<del></del>
Assignment. whose name and address appears in Financing statement bearing file numbers.  9. Amendment Financing statement bearing file numbers. Secured Party releases the collateral number shown above.	curity interest under the financing statement mancing statement bearing file number shill of the property listed on this file, is assign	nt bearing the file number shown above.  sown above to the led to the assignee in item 11.	fective
11.			11A. Enter Code(s) From Back of Form That Best Describes The
			Collateral Covered  By This Filing:
			<del></del>
•			<del></del>
			<del></del>
			/
Check X if covered: Products of Collateral are also co	overed.	1201	/
		15/	1
Signature(s) of Debtor(s)	······································	Signature(s) of Secured Party(ies)	
Signature(s) of Debtor(s) (necessary only if item 9 is an	pplicable)	Signature(s) of Secured Party(ies)	7-71 '
Type Name of Individual or Business	<del></del>	SouthTrust Bank Type Name of Individual or Business	
	ICER COPY - ACKNOWLEDGEMENT	······································	RM UNIFORM COMMERCIAL CODE FORM LICC-3