JCC FINANCING STATEMENT AMENDMENT OLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] PATRICIA HUNTLEY/205-226-1925 B. SEND ACKNOWLEDGMENT TO: (Name and Address) ALABAMA POWER COMPANY 600 NORTH 18TH STREET BIRMINGHAM, AL 35291		Inst # 2002-1419	13/26/2002-14191 1:46 PM CERTIFIED SHELDY COUNTY JUDGE OF PROBATE
IB. INITIAL FINANCING STATEMENT FILE #	THE A	1b. This FINANCING STATEMEN	E ONLY
37363/SHELBY		to be filed [for record] (or record REAL ESTATE RECORDS.	rded) in the
2. TERMINATION: Effectiveness of the Financing Statement identified above			
3. CONTINUATION: Effectiveness of the Financing Statement identified absolutional period provided by applicable law.	ove with respect to security interest(s) or t	ne Secured Party authorizing this Continuation S	latement is
4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and 5. AMENDMENT (PARTY INFORMATION): This Amendment effects De			
Also check one of the following three boxes and provide appropriate information in CHANGE name and/or address: Give current record name in item 6a or 6b; also name (if name change) in item 7a or 7b and/or new address (if address change). CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME	so give new DELETE name: Give		a or 7b, and also 7d-7g (If applicable).
86. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
KRAMER	DIANA	L.	
7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME			
OR		····· -·· - · · · · · · · · · · · · · ·	1
7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
	CITY	STATE POSTAL CODE	
7c. MAILING ADDRESS	lou i	10	COUNTRY
189 BROOKHOLLOW DR	PELHAM	AL 35124	
189 BROOKHOLLOW DR 7d. TAX ID #: SSN OR EIN ADD'L INFO RE 76. TYPE OF ORGANIZATION ORGANIZATION		AL 35124	
189 BROOKHOLLOW DR 7d. TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR 8. AMENDMENT (COLLATERAL CHANGE): check only one box.	PELHAM 7f. JURISDICTION OF ORGANIZATIO	AL 35124 N 7g. ORGANIZATIONAL ID #, if any	
7d. TAX ID #: SSN OR EIN ADD'L INFO RE ORGANIZATION ORGANIZATION DEBTOR 8. AMENDMENT (COLLATERAL CHANGE): check only one box. Describe collateral deleted or added, or give entire restated collateral.	PELHAM 7f. JURISDICTION OF ORGANIZATIO eral description, or describe collateral	AL 35124 N 7g. ORGANIZATIONAL ID #, if any assigned.	NONE
7d. TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR 8. AMENDMENT (COLLATERAL CHANGE): check only one box. Describe collateral deleted or added, or give entire restated collate	PELHAM 7f. JURISDICTION OF ORGANIZATIO eral description, or describe collateral MENDMENT (name of assignor, if this is a	AL 35124 7g. ORGANIZATIONAL ID #, if any assigned. assigned.	NONE
7d. TAX ID #: SSN OR EIN ADD'L INFO RE ORGANIZATION ORGANIZATION DEBTOR 8. AMENDMENT (COLLATERAL CHANGE): check only one box. Describe collateral deleted or added, or give entire restated collateral.	PELHAM 7f. JURISDICTION OF ORGANIZATIO eral description, or describe collateral MENDMENT (name of assignor, if this is a	AL 35124 7g. ORGANIZATIONAL ID #, if any assigned. assigned.	NONE
189 BROOKHOLLOW DR 7d. TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR 8. AMENDMENT (COLLATERAL CHANGE): check only one box. Describe collateral deleted or added, or give entire restated collate restated collate 9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AN adds collateral or adds the authorizing Debtor, or if this is a Termination authorize	PELHAM 7f. JURISDICTION OF ORGANIZATIO eral description, or describe collateral MENDMENT (name of assignor, if this is a	AL 35124 7g. ORGANIZATIONAL ID #, if any assigned. assigned.	NONE