

20020528000248610 Pg 1/1 28.00 Shelby Cnty Judge of Probate, AL 05/28/2002 08:16:00 FILED/CERTIFIED

UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] Nancy C. Clarke - (205) 868-3605 B. SEND ACKNOWLEDGMENT TO: (Name and Address) Protective Life Insurance Company P. O. Box 2606 Birmingham, Alabama 35202 ATTN: Investment Department THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY This FINANCING STATEMENT AMENDMENT is 1a. INITIAL FINANCING STATEMENT FILE # to be filed [for record] (or recorded) in the 2001-01352 - filed Shelby County, Alabama - filed 1/12/2001 **REAL ESTATE RECORDS.** TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in item 7c; and also give name of assignor in item 9. 5, AMENDMENT (PARTY INFORMATION): This Amendment affects | Debtor or | Secured Party of record. Check only one of these two boxes. Also check one of the following three boxes and provide appropriate information in items 6 and/or 7. ADD name: Complete item 7a or 7b, and also item 7c; also complete items 7d-7g (if applicable). CHANGE name and/or address: Give current record name in item 6a or 6b; also give new DELETE name: Give record name name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c. to be deleted in item 6a or 6b. 6. CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME |Morning Sun Villas, L.L.C., an Alabama limited liability company 6b. INDIVIDUAL'S LAST NAME MIDDLE NAME SUFFIX FIRST NAME 7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME SUFFIX MIDDLE NAME 7b. INDIVIDUAL'S LAST NAME **FIRST NAME** COUNTRY STATE POSTAL CODE CITY 7c. MAILING ADDRESS 7g. ORGANIZATIONAL ID #, if any 7e. TYPE OF ORGANIZATION 7f. JURISDICTION OF ORGANIZATION 7d. TAX ID #: SSN OR EIN ADD'L INFO RE ORGANIZATION NONE **DEBTOR** 8. AMENDMENT (COLLATERAL CHANGE): check only one box.

THIS IS A PARTIAL RELEASE OF Describe collateral description, or describe collateral descri COLLATERAL. Unit 815, in Horizon, a Condominium, as established by that certain Declaration of Condominium of Horizon, a Condominium, which is recorded in Instrument 2001-40927, to which Declaration of Condominium a plan is attached as Exhibit "A" thereto, said Plan being filed for record in Map Book 28, Page 141 in the Probate Office of Shelby County, Alabama, and to which said Declaration of Condominium the By-Laws of The Horizon Condominium Association is attached as Exhibit "D" together with an undivided interest in the Common Elements assigned to said units, as shown in Exhibit "C" of said Declaration of Condominium of Horizon, a Condominium. 9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here 🔲 and enter name of DEBTOR authorizing this Amendment. 9a. ORGANIZATION'S NAME Protective Life Insurance Company 9b. INDIVIDUAL'S LAST NAME MIDDLE NAME SUFFIX **FIRST NAME** 10. OPTIONAL FILER REFERENCE DATA Horizon Condos - to be filed in Shelby County, Alabama