NATIONAL UCC FINANCING STATEMENT AMENDMENT (FORM UCC3) (REV. 07/29/98)

IMPORTANT — READ INSTRUCTIONS ON BACK BEFORE FILLING OUT FORM — DO NOT DETACH STUB 077865

| | | | | She | 220621000291800 Pg elby Cnty Judge of /21/2002 11:04:00 | Probate, AL |
|-----------|--|--|--|-------------------------------|---|---|
| FO | CC FINANCING STATEMENT AMENDMEN LOW INSTRUCTIONS (front and back) CAREFULLY NAME & PHONE OF CONTACT AT FILER [optional] | | | | | |
| | Deland, Charles Lee Jr. 13995 Hwy 73 Lot 4 Montevallo, AL 35115 | | | | | |
| 1a. | INITIAL FINANCING STATEMENT FILE # | | THE ABOVE SPA | 1b. This | R FILING OFFICE USE | AMENDMENT is |
| 23 | County# 22310 03/01/89 ***ERMINATION: Effectiveness of the Financing Statement identified above is continued for the additional period provided by applicable law. | | | ecured Par | | n Statement. |
| 6. (| ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and a AMENDMENT (PARTY INFORMATION): This Amendment affects Delated check one of the following three boxes and provide appropriate information in its CHANGE name and/or address: Give current record name in item 8a or 8b; also name (if name change) in item 7a or 7b and/or new address (if address change) CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME | terns 6 and/or 7. | | of these t | wo boxes. | or 7b, and also -7g (if applicable). |
| OR | вы individual's LAST NAME Deland | FIRSTNAME | .es | MIDDLENAME | | SUFFIX |
| | CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME | | | | | |
| QR | 7b. INDIVIDUAL'S LAST NAME | FIRST NAME | | MIDDLE | NAME | SUFFIX |
| | TAX ID #: SSN OR EIN ADD'L INFO RE 70. TYPE OF ORGANIZATION | 7f. JURISDICTION | V OF ORGANIZATION | | POSTAL CODE NIZATIONAL ID #, if any | COUNTRY |
| | ORGANIZATION DEBTOR MENDMENT (COLLATERAL CHANGE): check only one box. escribe collateral deleted or added, or give entire restated collateral | al description or de | coribe colleteral Decriped | | | NONE |
| | escribe contacts of the added, of give entire the attention contacts | ar description, or de | scribe constent | | | |
| 20 | AME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDED SET OF A SECURED PARTY OF RECORD AUTHORIZING THIS AMENDED SET OF A SECURED PARTY OF RECORD AUTHORIZING THIS AMENDED SET OF A SECURED PARTY OF RECORD AUTHORIZING THIS AMENDED SET OF A SECURED PARTY OF RECORD AUTHORIZING THIS AMENDED SET OF A SECURED PARTY OF RECORD AUTHORIZING THIS AMENDED SET OF A SECURED PARTY OF RECORD AUTHORIZING THIS AMENDED SET OF A SECURED PARTY OF RECORD AUTHORIZING THIS AMENDED SET OF A SECURED PARTY OF RECORD AUTHORIZING THIS AMENDED SET OF A SECURED PARTY OF RECORD AUTHORIZING THIS AMENDED SET OF A SECURED PARTY OF RECORD AUTHORIZING THIS AMENDED SET OF A SECURED PARTY OF RECORD AUTHORIZING THIS AMENDED SET OF A SECURED PARTY OF RECORD AUTHORIZING THIS AMENDED SET OF A SECURED PARTY OF A SECURED PART | NDMENT (name of by a Debtor, check he | assignor, if this is an Assignment) ore and enter name of DEBT | . If this is a OR authoria | n Amendment authorized by zing this Amendment. | a Debtor which |
| Ì | SouthTrust Bank 9b. INDIVIDUAL'S LAST NAME | FIRST NAME | | MIDDLE N | AME | SUFFIX |
| 10.0 | PTIONAL FILER REFERENCE DATA | <u> </u> | | | | |