



20020625000299320 Pg 1/3 .00 Shelby Cnty Judge of Probate, AL 06/25/2002 15:08:00 FILED/CERTIFIED

ICC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CARE						
A. NAME & PHONE OF CONTACT AT FILER [o. 00053003494 5-30-02	ptionalj					
B. SEND ACKNOWLEDGMENT TO: (Name and	d Address)					
LexisNexis Document S PO Box 2969	Solutions					
Springfield, IL 62708	}					
			THE ABOVE SPAC	E IS FOR	FILING OFFICE USE ON	LY
1a. INITIAL FINANCING STATEMENT FILE # 025250	1990-04-17			1b. This	FINANCING STATEMENT AND filed [for recorded (or recorded L ESTATE RECORDS.	MENDMENT is
2. X TERMINATION: effectiveness of the Financing	Statement identified above is ten	minated with respect to s	ecurity intereset(s) of the Se	ecured Party	authorizing this Termination	Statement.
3. CONTINUATION: Effectiveness of the Financ continued for the additional period provided by ap	ing Statement identified above wi oplicable law.	th respect to security inte	rest(s) of the Secured Party	/ authorizing	this Continuation Statement is	s
4. ASSIGNMENT (full or partial): Give name of a	assignee in item 7a or 7b and add	iress of assignee in item	c; and also give name of a	ssignor in ite	em 9.	
5. AMENDMENT (PARTY INFORMATION): This	s Amendment affects Debto	r or Secured Party	of record. Check only one	of these tw	o boxes.	
Also check one of the following boxes and provide app			E name: Give record name	, Γ—Π ΔΩ	D name: Complete item 7a or	7h, and also
CHANGE name and/or address: Give current reconname (if name change) in item 7a or 7b and/or new	w address (if address change) in	item 7c. to be d	E name: Give record name eleted in item 6a or 6b.	iten	D name: Complete item 7a or n 7c; also complete items 7d-	7g (if applicable).
6. CURRENT RECORD INFORMATION: 16a. ORGANIZATION'S NAME				·,		
OR 6b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE	NAME	SUFFIX
			ر میں کا برور کا برور انتخاب میں کا برور کا	<u></u>		<u></u>
7. CHANGED (NEW) OR ADDED INFORMATION	N:					,
7a. ORGANIZATION'S NAME						
OR 7b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE	NAME	SUFFIX
7c. MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
	: , ,] 				<u> </u>
7d. TAX ID # SSN OR EIN ADD'NL INFO RE 7e. ORGANIZATION	TYPE OF ORGANIZATION	7f. JURISDICTION OF	ORGANIZATION	7g. ORG	ANIZATIONAL ID #, if any	ļ.— - —1
DEBTOR						NON
8. AMENDMENT (COLLATERAL CHANGE): che Describe collateral deleted or added, or given		lescription, or describe	collateral assigned.			
9. NAME OF SECURED PARTY OF RECORD adds collateral or adds the authorizing Debtor, or if the pa. ORGANIZATION'S NAME SECURITY PACIFIC HOUSIN OR 9b. INDIVIDUAL'S LAST NAME	is is a Termination authorized by	a Debtor, check here	_	TOR autho	rizing this Amendment.	a Debtor which
	<u> </u>					
10. OPTIONAL FILER REFERENCE DATA AL-Shelby County					86136	38-1

UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS (front and back) CAREFULLY 11. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form) 025250 1990-04-17 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form) 12a. ORGANIZATION'S NAME SECURITY PACIFIC HOUSING SERVICES INC c/o GREE OR 12b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME, SUFFIX 13. Use this space for additional information: DEBTOR NAME WEAVER, GARY K. P.O. BOX 208 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

AL-Shelby County

WILSONVILLE, AL 35186

11. IN	NITIAL FINANCING STATEMEN	d back) CAREFULLY T FILE # (same as item 1a on Amendmen	t form)
	5250	1990-04-17	
_		NG THIS AMENDMENT (same as item 9 o	n Amendment form)
- [12a. ORGANIZATION'S NAME		
	SECURITY PACIFIC	HOUSING SERVICES INC	c/o GREE
OR	12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX
1			

DEBTOR NAME

WEAVER, KATHY P.
P.O. BOX 208
WILSONVILLE, AL 35186

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY