

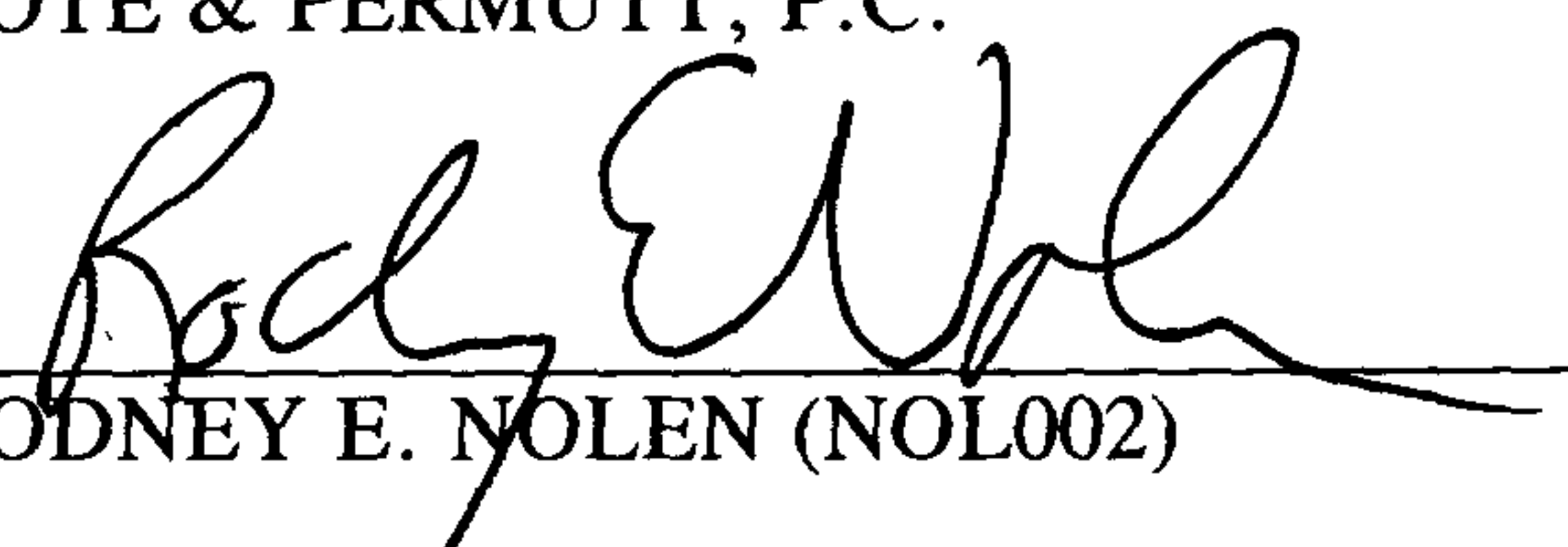
STATE OF ALABAMA)
)
JEFFERSON COUNTY)

FULL SATISFACTION OF RECORDED LIEN

KNOW ALL MEN BY THESE PRESENTS, that the undersigned, RODNEY E. NOLEN, Attorney for SHELBY COUNTY HEALTH CARE AUTH DBA SHELBY MEDICAL CENTER, acknowledges full payment of the indebtedness secured by that certain judgment in the case of SHELBY COUNTY HEALTH CARE AUTH DBA SHELBY MEDICAL CENTER vs. PAULA S. VINING, CIVIL ACTION NO. SM92-01469, which said judgment was recorded in the Office of the Judge of Probate of SHELBY County, Alabama, in Book No. 1993, Page No. 16937, and the undersigned does further hereby release said judgment.

IN WITNESS WHEREOF, the undersigned, RODNEY E. NOLEN, has caused these presents to be executed this the 27th day of JUNE, 2002.

SIROTE & PERMUTT, P.C.

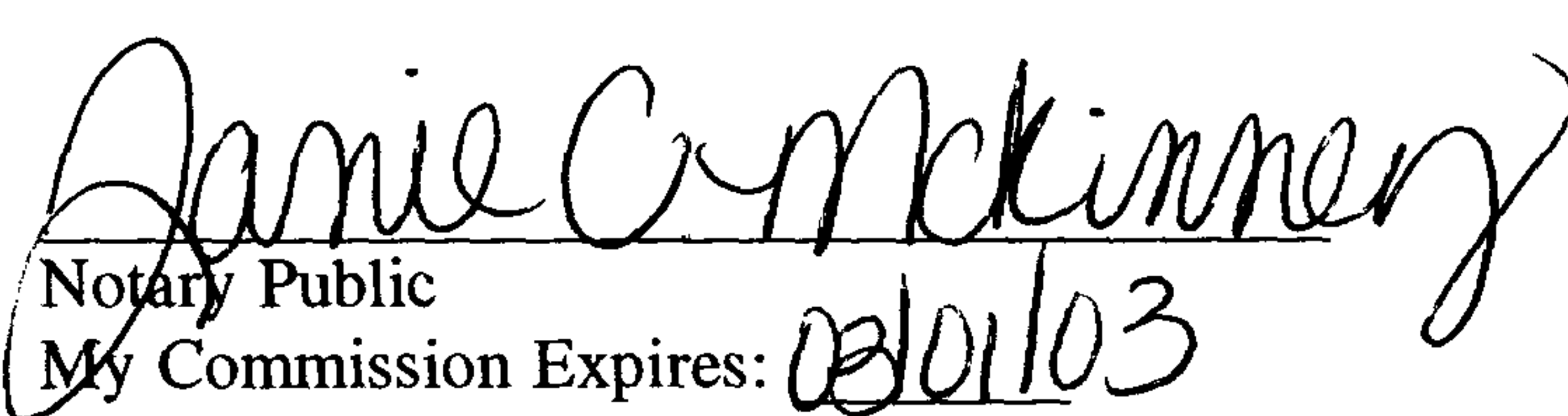
BY: 

RODNEY E. NOLEN (NOL002)

STATE OF ALABAMA)
)
JEFFERSON COUNTY)

I, the undersigned authority, in and for said County in said State, certify that RODNEY E. NOLEN, whose name as Attorney of SHELBY COUNTY HEALTH CARE AUTH DBA SHELBY MEDICAL CENTER, a corporation, is signed to the foregoing instrument, acknowledged before me on this day that, being informed of the contents of the instrument, he (as such Officer and with full authority) executed the same voluntarily (for and as the act of said Corporation).

Given under my hand and official seal, this the 27th day of JUNE, 2002.


Notary Public

My Commission Expires: 03/01/03

THIS INSTRUMENT WAS PREPARED BY:

SIROTE & PERMUTT, P.C.
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