

## UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional] 00053307955 8-8-02	
B. SE	<b>LexisNexis</b> <b>Document Solutions</b> 1029 J Street, Suite 100 Sacramento, CA 95814

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1a. INITIAL FINANCING STATEMENT FILE # 1997-36498	1997-11-07	1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. <input type="checkbox"/>
2. <input checked="" type="checkbox"/> <b>TERMINATION:</b> effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement.		
3. <input type="checkbox"/> <b>CONTINUATION:</b> 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.		
4. <input type="checkbox"/> <b>ASSIGNMENT</b> ( 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. <b>AMENDMENT (PARTY INFORMATION):</b> This Amendment affects <input type="checkbox"/> Debtor or <input type="checkbox"/> Secured Party of record. Check only <u>one</u> of these two boxes. Also check <u>one</u> of the following boxes and provide appropriate information in items 6 and/or 7. <input type="checkbox"/> <b>CHANGE</b> name and/or address: Give current record name in item 6a or 6b; also give new name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c. <input type="checkbox"/> <b>DELETE</b> name: Give record name to be deleted in item 6a or 6b. <input type="checkbox"/> <b>ADD</b> name: Complete item 7a or 7b, and also item 7c; also complete items 7d-7g (if applicable).		
6. <b>CURRENT RECORD INFORMATION:</b>		
6a. ORGANIZATION'S NAME		
OR	6b. INDIVIDUAL'S LAST NAME NICHOLS	FIRST NAME BRIAN
		MIDDLE NAME K
		SUFFIX
7. <b>CHANGED (NEW) OR ADDED INFORMATION:</b>		
7a. ORGANIZATION'S NAME		
OR	7b. INDIVIDUAL'S LAST NAME	FIRST NAME
		MIDDLE NAME
		SUFFIX
7c. MAILING ADDRESS		
CITY		
STATE		
POSTAL CODE		
COUNTRY		
7d. TAX ID # SSN OR EIN	ADD'NL INFO RE ORGANIZATION DEBTOR	7e. TYPE OF ORGANIZATION
7f. JURISDICTION OF ORGANIZATION		7g. ORGANIZATIONAL ID #, if any
		<input type="checkbox"/> NONE
8. <b>AMENDMENT (COLLATERAL CHANGE):</b> check only <u>one</u> box. Describe collateral <input type="checkbox"/> deleted or <input type="checkbox"/> added, or give entire <input type="checkbox"/> restated collateral description, or describe collateral <input type="checkbox"/> assigned.		

9. <b>NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT</b> (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 <input type="checkbox"/> and enter name of DEBTOR authorizing this Amendment.			
9a. ORGANIZATION'S NAME Bank of America FSB c/o GREENPOINT CREDIT			
OR	9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME
			SUFFIX
10. <b>OPTIONAL FILER REFERENCE DATA</b> AL-Shelby County			

# UCC FINANCING STATEMENT AMENDMENT ADDENDUM

**FOLLOW INSTRUCTIONS** (front and back) **CAREFULLY**

11. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form)  
1997-36498 1997-11-07

12. NAME OF PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form)

12a. ORGANIZATION'S NAME

Bank of America FSB c/o GREENPOINT CREDIT

**OR**

12b. INDIVIDUAL'S LAST NAME

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<b>MIDDLE NAME, SUFFIX</b>
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**13. Use this space for additional information:**

DEBTOR NAME

NICHOLS, BRIAN K.

510 CO RD 314

COLUMBIANA, AL 35051

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