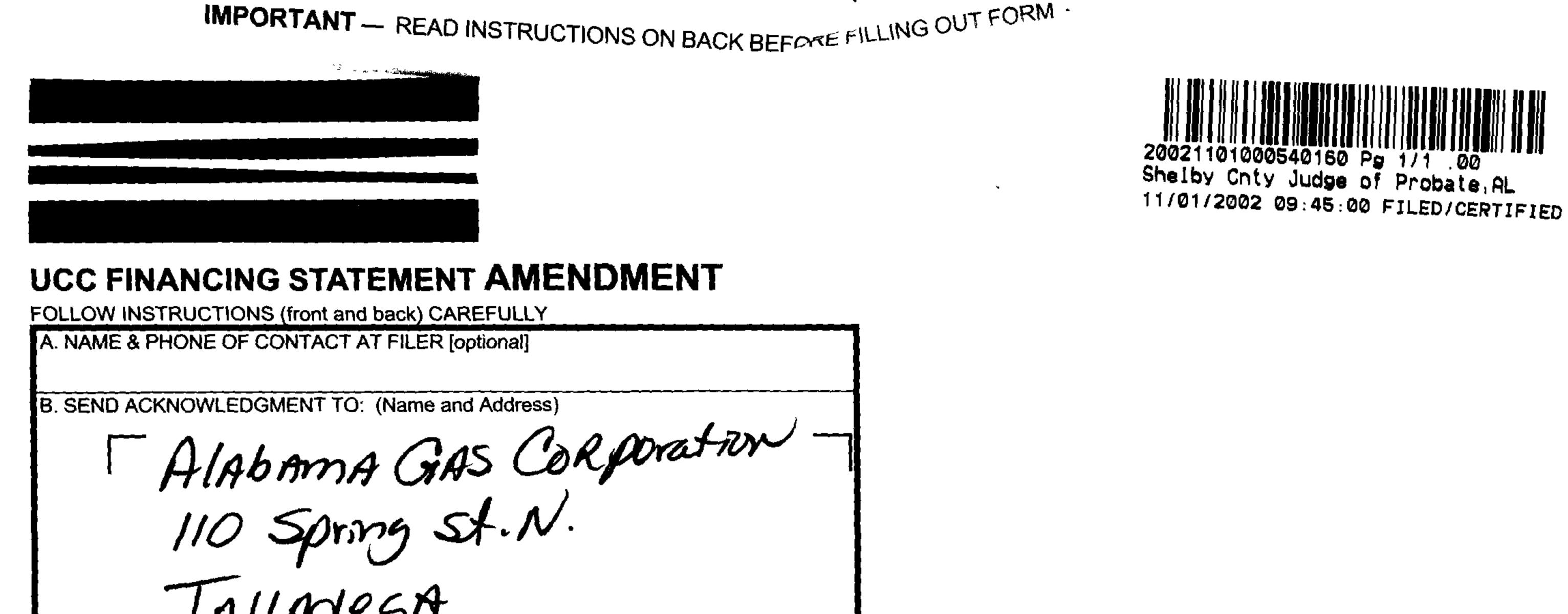
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Alabama GAS Corporation -110 Spring St.N. TALLACIESA THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY This FINANCING STATEMENT AMENDMENT is 1a. INITIAL FINANCING STATEMENT FILE # 999-32525 to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. 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 CHANGE 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. DELETE name: Give record name litem 7c; also complete items 7d-7g (if applicable). to be deleted in item 6a or 6b. 6. CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME l SUFFIX MIDDLE NAME 6b. INDIVIDUAL'S LAST NAME FIRST NAME 7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME **SUFFIX** MIDDLE NAME FIRST NAME 7b. INDIVIDUAL'S LAST NAME POSTAL CODE COUNTRY STATE 7c. MAILING ADDRESS CITY 7g. ORGANIZATIONAL ID #, if any 7e. TYPE OF ORGANIZATION 7f. JURISDICTION OF ORGANIZATION ADD'L NFO RE 7d. TAX ID #: SSN OR EIN ORGANIZATION NONE DEBTOR 8. AMENDMENT (COLLATERAL CHANGE): check only one box. Describe collateral deleted or added, or give entire restated collateral description, or describe collateral assigned. 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 SUFFIX MIDDLE NAME 10 OPTIONAL FILER REFERENCE DATA

ITEM 5079 (C

GREATLAND # TO ORDER CALL: 800-530-

OR