11/27/2002 14:11:00 FILED/CERTIFIED

CC FINANCING STATEMENT AMENDME	NT		
OLLOW INSTRUCTIONS (front and back) CAREFULLY			
. NAME & PHONE OF CONTACT AT FILER [optional]			
Richard C. Fruechtenicht - (205)	868-3610		
. SEND ACKNOWLEDGMENT TO: (Name and Address)			
Table Thermone Comp	277		
Protective Life Insurance Compa	any		
P. O. Box 2606			
"Birmingham, AL 35202			
ATTN: Investment Department			
		•	
	THE ABOVE	SPACE IS FOR FILING OFFICE	
. INITIAL FINANCING STATEMENT FILE #	1 her Country AT	1b. This FINANCING STATE	
2001-01352 - filed 1/12/2001 - She		K REAL ESTATE RECORD	<b>S</b>
TERMINATION: Effectiveness of the Financing Statement identified above			
CONTINUATION: Effectiveness of the Financing Statement identified a	above with respect to security interest(s) of the Sec	cured Party authorizing this Continuati	ion Statement is
continued for the additional period provided by applicable law.			
. ASSIGNMENT (full or pertial): Give name of assignee in item 7s or 7b a	nd address of assignee in item 7c; and also give ner	ne of assignor in item 9.	
AMENDMENT (PARTY INFORMATION): This Amendment effects			······································
Also check one of the following three boxes and provide appropriate information	in items 6 and/or 7.	<b>.</b>	
CHANGE name and/or address: Give current record name in item 6s or 6b; name (if name change) in item 7s or 7b and/or new address (if address charge)			tem 7a or 7b, and also tems 7d-7g (if applicable).
CURRENT RECORD INFORMATION:	IGE III IUSIN FO.		
G. OPCANIZATIONS NAME			
Morning Sun Villas, L.L.C., an	. Alabama limited liabi	llity company	
6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
F AND THE ADDED MICORMATION.			
. CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME			
78. ORGANIZATION STAME			•
7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
70. NACIAIDOAL S CAST TOWNE			
- AAN INO ADORECC	CITY	STATE POSTAL CODE	COUNTRY
c. MAILING ADDRESS t			
d. TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	79. ORGANIZATIONAL ID #,	if any
d. TAX ID # SSN OR EIN ADD'L INFO RE 76. TYPE OF ORGANIZATION ORGANIZATION			NONE
DEBTOR		· · · · · · · · · · · · · · · · · · ·	NON
. AMENDMENT (COLLATERAL CHANGE): check only one box.	· · · · · · · · · · · · · · · · · · ·	•	
Describe cottateral X deleted or added, or give entire restated coll		gnad.	
S IS A PARTIAL RELEASE OF COLLATERA	L		
t 304, in Horizon, a Condominium,	as established by that	t certain Declara	ation of
dominium of Horizon, a Condominium,	, which is recorded in	Instrument 2001-	-40927, to
ch Declaration of Condominium a pla	an is attached as Exhil	bit "A" thereto,	said Plan
ng filed for record in Map Book 28	Page 141 in the Proba	ate Office of She	lby County
bama, and to which said Declaration	of Condominium the R	v-I.aws of The Hor	cizon
Dama, and to which said Declaration	. B-bake Mun towarhor	with an undivide	d interest
dominium Association is attached as	3 Exhibit D together	mith an marking	dd Doclarai
the Common Elements assigned to sat		Exhibit of 88	ITG Decrara
Condominium of Horizon, a Condomini	Lum.		
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS		innment) If this is an Amendment auti	norized by a Debtor which
9. NAME OF SECURED PART IT OF RECORD AUTHORIZING THIS adds colleteral or adds the authorizing Debtor, or if this is a Termination authorizing Debtor.	rized by a Debtor, check here and enter name o	of DEBTOR authorizing this Amendme	ent.
96. ORGANIZATION'S NAME		· · · · · · · · · · · · · · · · · · ·	
	aniz '		
Protective Life Insurance Compa	FIRST NAME	MIDDLE NAME	SUFFIX
BU. MICHARCAL G LAGI MAME			,
		_	<b>=</b>
10.OPTIONAL FILER REFERENCE DATA  Horizon Condos - to be filed in	n Shelby County, AL (L	oan 24829)	

FILING OFFICE COPY -- NATIONAL UCC FINANCING STATEMENT AMENDMENT (FORM UCC3) (REV. 07/29/98)