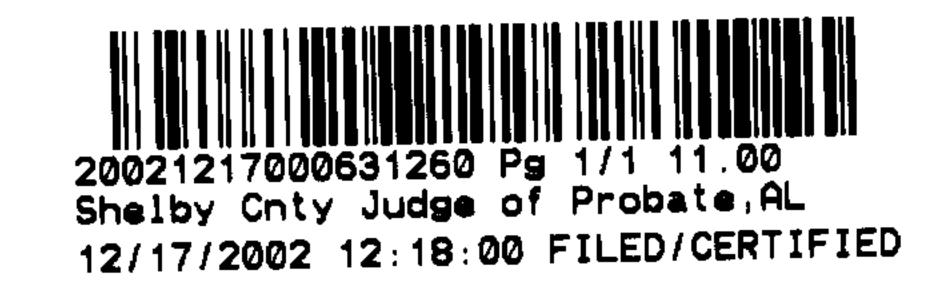
Recording Requested By: Regions Mortgage, Inc.

When Recorded Return To:

Regions Mortgage, Inc. P.O. Box 669 Montgomery, AL 36177-9469



DISCHARGE OF MORTGAGE

Regions Mortgage, Inc. #:003345659 "Williams" Lender ID:266498957/ Shelby, Alabama 01/117: 11.00 Received Date: 03/11/99

KNOW ALL MEN BY THESE PRESENTS,
That REGIONS BANK SBM REGIONS BANK OF LOUISIANNA SBM HOME FEDERAL SAVINGS AND
LOAN OF THE SOUTH, BY REGIONS MORTGAGE, INC., ITS AUTHORIZED AGENT, hereinafter
referred to as the Mortgagee, DOES HEREBY CERTIFY, that a certain Mortgage dated
02/25/1982, made and executed by EUGENE B WILLIAMS, AND WIFE GENE M. WILLIAMS to
secure payment of the principal sum of \$52,500.00 plus interest, originally to
HOME FEDERAL SAVINGS AND LOAN ASSOCIATION OF THE SOUTH, in the County of SHELBY
and the State of ALABAMA, Recorded 03/02/1982 as Instrument No. NA Mortgage Book
418, Page 684, is now Paid and Satisfied, and is therefore discharged.

In all references in this instrument to any party, the use of a particular gender or number is intended to include the appropriate gender or number as the case may be.

IN WITNESS WHEREOF, the said Mortgagee has set his hand and has caused these presents to be signed by its duly authorized officer(s).

Regions Bank SBM Regions Bank of Louisianna SBM Home Federal Savings and Loan of the South, By Regions Mortgage, Inc., its authorized agent On October 29, 2002

STATE OF Alabama COUNTY OF Elmore

ON 1000 , before me, Sheila D. Glaze, a Notary Public in and for the County of Elmote, State of Alabama, personally appeared WILLIE MARTIN-BERRY, PAID IN FULL SUPERVISOR and MEREDITH ANGELETTE, PAID IN FULL MANAGER, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity, and that by his/her/their signature on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal,

SHEILA D. GLAZE

Notary Expires: 10/22/2005 #NOC 934053

D. GLAZA

STATES

EXPIRES

EXPIRES

CONTRIGUES

CONTRIGUES

AMA STATE

AMA STATE

(This area for notarial seal)
Prepared By: SHEILA GLAZE 605 S. Perry St. Montgomery, Al. 36104 1-800-392-5669

SRD*19990331-0122 ALSHELB SHELBY AL BAT: 10000/003345659 KXALDOM1