



20030102000000140 Pg 1/2 33.40 Shelby Cnty Judge of Probate, AL 01/02/2003 07:42:00 FILED/CERTIFIED

UCC FINANCING STATEMENT		Shelby Chty Judge 01/02/2003 07:42:		
OLLOW INSTRUCTIONS (front and back) CAREFULLY				
A. NAME & PHONE OF CONTACT AT FILER [optional]		U2		
Tommy Oswalt 205-444-07 B. SEND ACKNOWLEDGMENT TO: (Name and Address)	704	5.		
Alabama Gas Corporation #20 SOuth 20th Street Birmingham, AL 35295				
	THE ABOVE	E SPACE IS FO	R FILING OFFICE US	EONLY
1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1 1a. ORGANIZATION'S NAME	la or 1b) - do not abbreviate or combine names			
OR 1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME		SUFFIX
Pocopanni	T.			
c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
113 Hillside Road	Bessemer	Ι Δ 7	35020	USA
d. TAX ID #: SSN OR EIN ADD'L INFO RE 1e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR	1f. JURISDICTION OF ORGANIZATION	1g. ORGANIZATIONAL ID #, if any		NONE
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one 2a. ORGANIZATION'S NAME	debtor name (2a or 2b) - do not abbreviate or com	nbine names	· • · · · · · · · · · · · · · · · · · ·	INCINE
OR 2b. INDIVIDUAL'S LAST NAME	FIRST NAME	- IMIDDLE I	MIDDLE NAME SUFFIX	
c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
d. TAX ID #: SSN OR EIN ADD'L INFO RE 2e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any		
. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNO 3a. ORGANIZATION'S NAME	R S/P) - insert only <u>one</u> secured party name (3a or	3b)		NONE
OR Alabama Gas Corporation 3b. INDIVIDUAL'S LAST NAME				
"`\ 3b. INDIVIDUAL'S LAST NAME"	FIRST NAME MIDDLE NAME		NAME	SUFFIX
		STATE	POSTAL CODE	COUNTRY
c. MAILING ADDRESS	CITY			

Trane Furnace M/N: TUD080C936K

S/N: 2474LP52G

Trane Coil

M/N: TXC036C4HPC

S/N:

2475N665G

35900

5. ALTERNATIVE DESIGNATION [if applicable]:	LESSEE/LESSOR CONSIGNEE	CONSIGNOR BAILEE/BAILOR	SELLER/BUYER	AG. LIEN NON-UCC FILING
6. This FINANCING STATEMENT is to be filed SECORDS. Attach Addendum	[for record] (or recorded) in the REAL [if applicable]	7. Check to REQUEST SEARCH REP	ORT(S) on Debtor(s)	All Debtors Debtor 1 Debtor 2
8. OPTIONAL FILER REFERENCE DATA				

JCC FINANCING STATE					
NAME OF FIRST DEBTOR (1a or 1		STATEMENT			
9a. ORGANIZATION'S NAME					
P 9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX			
Pocopanni	T	C			
. MISCELLANEOUS:					
1 ADDITIONAL DEBTOR'S EXACT	FULL LEGAL NAME - insert only	Ti one name (11a or 11b) - do not abbreviate or c		IS FOR FILING OFFIC	E USE ONLY
11a. ORGANIZATION'S NAME	TOLL LLOTL TATALE - INSORT OFFI			· · · · · · · · · · · · · · · · · · ·	
11b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	NAME	SUFFIX
c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
d. TAX ID #: SSN OR EIN ADD'L INFO ORGANIZAT DEBTOR		ON 11f. JURISDICTION OF ORGANIZATIO	N 11g. ORG	SANIZATIONAL ID #, if ar	ny NO
2. ADDITIONAL SECURED PAR 12a. ORGANIZATION'S NAME	RTY'S or ASSIGNOR S	S/P'S NAME - insert only <u>one</u> name (12a or	12b)		
Capital Heatir	ng & Cooling	FIRST NAME	MIDDLE	NAME	SUFFIX
				Incort Cope	COLINTER
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
524-A Mineral Trans. 3. This FINANCING STATEMENT covers collateral, or is filed as a fixture filing. 4. Description of real estate: X	timber to be cut or as-extra	Hoover acted 16. Additional collateral description:	A T.	35244-4	571 <u>US</u>
28 & 29 Block 4 ewood Estates cel 38-17-4-3-7					
 Name and address of a RECORD OWN! (if Debtor does not have a record interest) 					
		17. Check only if applicable and check Debtor is a Trust or Trustee		roperty held in trust or	Decedent's Es
		18. Check <u>only</u> if applicable and check	k <u>only</u> one box.		
		Debtor is a TRANSMITTING UTILITED Filed in connection with a Manufacture		n effective 30 years	
				effective 30 years	