



UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] B. SEND ACKNOWLEDGMENT TO: (Name and Address) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1. DEBTOR'S EXACT FULL LEGAL NAME - insert only <u>one</u> debtor name (1a or 1b) - do not abbreviate or combine names 1a. ORGANIZATION'S NAME 1b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX POSTAL CODE COUNTRY STATE 1d. TAX ID #: SSN OR EIN APD'L INFO RE 1e. TYPE OF ORGANIZATION 1f. JURISDICTION OF ORGANIZATION 1g. ORGANIZATIONAL ID #, if any ORGANIZATION NONE DEBTOR 2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names 2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX 2c. MAILING ADDRESS CITY POSTAL CODE STATE COUNTRY 2d. TAX ID #: SSN OR EIN ADD'L INFO RE | 2e. TYPE OF ORGANIZATION 2f. JURISDICTION OF ORGANIZATION 2g. ORGANIZATIONAL ID #, if any ORGANIZATION **DEBTOR** NONE 3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b) 3a. ORGANIZATION'S NAME FIRST NAME MIDDLE NAME SUFFIX 3c. MAILING ADDRESS POSTAL CODE COUNTRY 3 ton Haw Parkage linet, 100,000 BTU, 12 See 36 J036 100-1, 5/0# 08/1630781 4. This FINANCING STATEMENT covers the following collateral:

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. ALZERNATIVE DESIGNATION [if applicable]:	LESSEE/LESSOR CONSIGNEE/	CONSIGNOR BAILEE/BAILO	R SELLER/BUYER	AG. LIEN NON-UC	CFILING
This FINANCING STATEMENT is to be filed ESTATE RECORDS. Attach Addendum		7. Check to REQUEST SEARCH RE	EPORT(S) on Debtor(s)	All Debtors Debtor 1	Debtor 2
OPTIONAL FILER REFERENCE DATA					

NATIONAL UCC FINANCING STATEMENT ADDENDUM (FORM UCC1Ad) (REV. 07/29/98)

IMPORTANT — READ INSTRUCTIONS ON BACK BEFORE FILLING OUT FORM — DO NOT DETACH STUB

20030318000163970 Pg 2/2 32.80 Shelby Cnty Judge of Probate, AL 03/18/2003 14:25:00 FILED/CERTIFIED

UCC FINANCING STATEME						
9. NAME OF FIRST DEBTOR (1a or 1b) Of		TEMENIT				
9a. ORGANIZATION'S NAME	N KELATED FINANCING STA	IEMENI				
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX				
Thomason	HAROW					
10. MISCELLANEOUS:						
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			THE ABOVE SPA	CE IS FOR FILING OF	FICE LISE ONLY	
11. ADDITIONAL DEBTOR'S EXACT FULL	LEGAL NAME - insert only one n	ame (11a or 11b) - do not abbreviate				
11a. ORGANIZATION'S NAME	CECOTIE TO UTIE TO UTION OTION	dillo (11d oi 11b) - do not dobievidto	Or combine maries	<u></u>		
11b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE NAME		
11c. MAILING ADDRESS		CITY	STAT	E POSTAL CODE	COUNTRY	
		<u></u>				
11d. TAX ID #: SSN OR EIN ADD'L INFO RE ORGANIZATION	11e. TYPE OF ORGANIZATION	11f. JURISDICTION OF ORGANIZA	TION 11g.	ORGANIZATIONAL ID #, it	f any	
DEBTOR					NON	
12. ADDITIONAL SECURED PARTY'S 12a. ORGANIZATION'S NAME	S or ASSIGNOR S/P'S	NAME - insert only <u>one</u> name (12a	or 12b)	<u> </u>		
12a. ORGANIZATION SINANE	L-11 1)				
OR 12b. INDIVIDUAL'S LAST NAME	7 7 /	FIRST NAME	Тмірг	LE NAME	SUFFIX	
12c. MAILING ADDRESS		CITY	STAT	E POSTAL CODE	COUNTRY	
5000 C Whit	11N4 J)	Pelhan	Δ	13500	()	
	per to be cut or as-extracted	16. Additional collateral description	1:			
collateral, or is filed as a fixture filing.						
14. Description of real estate:						
NAVajo +MAI						
21d Section						
Lot 10 BIK	5					
nb 5 pg. 2	4					
15. Name and address of a RECORD OWNER of a (if Debtor does not have a record interest):	bove-described real estate					
		17 Ob 1 27 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2				
		17. Check <u>only</u> if applicable and ch		na manana da la	"	
		Debtor is a Trust or Trustee acting with respect to property held in trust or Decedent's Estate 18. Check only if applicable and check only one box.				
	Debtor is a TRANSMITTING UTILITY					
		Filed in connection with a Mani		ction — effective 30 years		
		Filed in connection with a Publi				
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