



				/	:00 FILED/(
CC FINANCING STATEMENT	AMENDMENT				
DLLOW INSTRUCTIONS (front and back) CARE					
ANAME & PHONE OF CONTACT AT FILER TOPES ATRICIA HUNTLEY/205-226-1925	-				
. SEND ACKNOWLEDGMENT TO: (Name and A	(ddress)				
ALABAMA POWER COMPAN	JY				
600 NORTH 18TH STREET					
BIRMINGHAM AL 35291					
·		Ti	IE ABOVE SPACE IS F	OR FILING OFFICE US	SEONLY
. INITIAL FINANCING STATEMENT FILE # 1999-25028/SHELBY				nis FINANCING STATEMEI be filed (for record) (or rec	
TERMINATION: Effectiveness of the Financing S	Statement identified above is terminated	with respect to security	R	EAL ESTATE RECORDS.	<u>,</u>
CONTINUATION: Effectiveness of the Financin	g Statement identified above with resp				
continued for the additional period provided by app	olicable law.				
ASSIGNMENT (full or partial): Give name of ass					
AMENDMENT (PARTY INFORMATION): This A Also check one of the following three boxes and provide	البيبيا		rd. Check only <u>one</u> of these	two boxes.	
CHANGE name and/or address: Give current record name (if name change) in item 7a or 7b and/or new			Give record name	DD name: Complete item	7a or 7b, and als
CURRENT RECORD INFORMATION:	address (ii address change) iii itelli 7 C.	TO DE GEIELEG HI	item da or do.	em 7c; also complete items	7d-7g (if applic
6a. ORGANIZATION'S NAME					······································
6b. INDIVIDUAL'S LAST NAME	FIRST NA	ME	MIDDLE	NAME	SUFFIX
HARTLEY	ARTH		C.		III
CHANGED (NEW) OR ADDED INFORMATION:					
7a. ORGANIZATION'S NAME					
7b. INDIVIDUAL'S LAST NAME	FIRST NA	ME	MIDDLE	E NAME	SUFFIX
GOODWILLIE		BARBARA			
MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTR
5 HOLLYBROOK LAKE TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYP	LEED		AL	35094	
ORGANIZATION DEBTOR	E OF ORGANIZATION /1. JURISI	DICTION OF ORGANIZ	ATION 7g. ORG	SANIZATIONAL ID #, if any	/
AMENDMENT (COLLATERAL CHANGE): check	only one box.	· · · · · · · · · · · · · · · · · · ·	<u> </u>		<u> </u>
Describe collateral deleted or added, or give	•	i, or describe collatera	l assigned.		
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NAME OF SECURED PARTY OF RECORD AL	THORIZING THIS AMENDMENT	(name of assignor, if this	s is an Assignment). If this is	s an Amendment authorized	d by a Debtor wh
NAME OF SECURED PARTY OF RECORD AL adds collateral or adds the authorizing Debtor, or if this in 9a. ORGANIZATION'S NAME	THORIZING THIS AMENDMENT a Termination authorized by a Debtor,	name of assignor, if this	s is an Assignment). If this is ter name of DEBTOR author	s an Amendment authorized orizing this Amendment.	d by a Debtor wh
9a. ORGANIZATION'S NAME ALABAMA POWER COMPANY	THORIZING THIS AMENDMENT a Termination authorized by a Debtor,	name of assignor, if this	s is an Assignment). If this is ter name of DEBTOR author	s an Amendment authorized orizing this Amendment.	d by a Debtor whi
adds collateral or adds the authorizing Debtor, or if this is	THORIZING THIS AMENDMENT is a Termination authorized by a Debtor, or FIRST NA	check here and en	s is an Assignment). If this is ter name of DEBTOR authorized	orizing this Amendment.	by a Debtor whi