



	C FINANCING STATEMENT AIVIENDIVIEN LOW INSTRUCTIONS (front and back) CAREFULLY	V I				
Α.	NAME & PHONE OF CONTACT AT FILER [optional]	·—····				
	Sandra C. Pierce 205-665-3323					
B. S	SEND ACKNOWLEDGMENT TO: (Name and Address)					
	'Tne Peoples Bank & Trust Co					
	P O Box 240					
	Montevallo, AL 35115					
			THE ABOVE		R FILING OFFICE USE	
1 a.	INITIAL FINANCING STATEMENT FILE #				s FINANCING STATEMENT be filed (for record) (or recor	
	Inst. #2000-30644				AL ESTATE RECORDS.	in estima. Canada mont
2.	X TERMINATION: Effectiveness of the Financing Statement identified above					
3.	CONTINUATION: Effectiveness of the Financing Statement identified about continued for the additional period provided by applicable law.	e with respect to	security interest(s) of the Secu	red Party autho	rizing this Continuation Stat	tement is
					· Consideration in the second	
	ASSIGNMENT: FULL or PARTIAL. Give name of assignee in item :			· ·		
	AMENDMENT (PARTY INFORMATION): This Amendment affects De		red Party of record. Check only	y <u>one</u> of these t	wo boxes.	
	Also check one of the following three boxes and provide appropriate information		'. □ DELETE name: Give record a	.ama	DD name: Complete item 7a	a or 7h, and also
	CHANGE name and/or address: Give current record name in item 6a or 6b; a name (if name change) in item 7a or 7b and/or new address (if address change)	ge) in item 7c.	to be deleted in item 6a or 6		em 7c; also complete items	7d-7g (if applicable
6. (CURRENT RECORD INFORMATION:					
	6a. ORGANIZATION'S NAME					
OR		TOIDOY MANG	TODOT NAME		MIDDLE NAME	
U	6b. INDIVIDUAL'S LAST NAME	FIRST NAME			MIDDLE NAME	
	Coxwell	Michelle		H	······································	
	CHANGED (NEW) OR ADDED INFORMATION:		· · · · · · · · · · · · · · · · · · ·			
	7a. ORGANIZATION'S NAME					
OR	7b. INDIVIDUAL'S LAST NAME	FIRST NAME		IMIDDLE	MIDDLE NAME SUFFIX	
	78. INDIVIDUAL S LAST NAIVIE	I INST NAME		WIIDDEL		
		CITY		STATE	IPOSTAL CODE	COUNTRY
7c.	MAILING ADDRESS		Calera		35040	COOMINI
	2004 10th Avenue			AL		
7d.	TAX ID #: SSN OR EIN OPTIONAL 7e. TYPE OF ORGANIZATION ADD'L INFO RE	71. JURISDICTI	ION OF ORGANIZATION	7g. Ong	ANIZATIONAL ID #, if any	
	ORGANIZATION Individual DEBTOR		,,	<u></u>		NONE
	AMENDMENT (COLLATERAL CHANGE): check only one box.					
C	Describe collateral 🔀 released or 🔲 added, or give entire 🔲 restated collat	teral description.				
71) 1 O					
K	Record Owner: Michelle H Coxwell					
_	7 - 7 7 - 4 7 - 33					
-	Collateral Desc:	60 Camial	Number 0026DT	7CK313	One Compad M	loni tor
(One compaq computer CPU Model CP05Bwl	On Seriar	a Drintore Mod	20KJIJ, 21 TI30	One compay O Printer Ser	rial
	CPQ MV54 Serial Number 026BA64WC257, (one compa	q rimiters mod	ET TONO	o illinect ber	, .
17	Number 1MU5CNC26MYB					
						
	NAME OF SECURED PARTY OF RECORD (or if this is an Assignment n	ame of assignor).				
OR	The Peoples Bank & Trust Co	FIRST NAME		MIDDLE	NAME	SUFFIX
	DO. INTOLETO LATOL MANIE	IAMINE		(VIII)		
	DEOLUDED 01011 TUDE (0)			007101111		<u></u>
10.	REQUIRED SIGNATURE(S)		11	I. OPHONAL	FILER REFERENCE DA	IA