UCC FINANCING STATEMENT AMENDMENT (FORM UCC3) (REV. 05/22/02)

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

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		20030605000350250 Pg Shelby Cnty Judge of 06/05/2003 13:10:00 F	1/1 .00 Probate.0
UCC FINANCING STATEMENT AMENDMEN			
FOLLOW INSTRUCTIONS (front and back) CAREFULLY			
A. NAME & PHONE OF CONTACT AT FILER [optional]			
B. SEND ACKNOWLEDGMENT TO: (Name and Address)			
Fox Alarm Co., who.			
126 Brooklane DR.			
Hueytown, Al. 35023			
1a. INITIAL FINANCING STATEMENT FILE #	THE ABOVE SPA	CE IS FOR FILING OFFICE USE (
<u> 2002080200363110</u>		to be filed [for record] (or records REAL ESTATE RECORDS.	ed) in the
2. TERMINATION: Effectiveness of the Financing Statement identified above is 3. CONTINUATION: Effectiveness of the Financing Statement identified above.			
3. CONTINUATION: Effectiveness of the Financing Statement identified above continued for the additional period provided by applicable law.	ve with respect to security interest(s) of the Secured	Party authorizing this Continuation State	ement is
4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and a			
5. AMENDMENT (PARTY INFORMATION): This Amendment affects Deb Also check one of the following three boxes and provide appropriate information in its		<u>e</u> of these two boxes.	
CHANGE name and/or address: Please refer to the detailed instructions in regards to changing the name/address of a party.	DELETE name: Give record name to be deleted in item 6a or 6b.	ADD name: Complete item 7a or 7 item 7c; also complete items 7e-7g	b, and also (if applicable).
6. CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME	· · ·		
OR 66. INDIVIDUAL'S LAST NAME	Tennor Middle		
OILY MS	FIRST NAME	MIDDLE NAME	SUFFIX
7. CHANGED (NEW) OR ADDED INFORMATION:	T T T T T		
7a. ORGANIZATION'S NAME			, <u>, , , , , , , , , , , , , , , , , , </u>
7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
7c. MAILING ADDRESS			
70. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
7d. SEE INSTRUCTIONS ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if any	
DEBTOR			NONE
8. AMENDMENT (COLLATERAL CHANGE): check only one box. Describe collateral deleted or added, or give entire restated collateral	I description, or describe collateral Dassigned		
		- ΛΛ - Λ -	
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMEN	DMENT (name of assignor, if this is an Assignment)	ollo Co. If this is an Amendment authorized by	a Dabtas which
adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by 9a. ORGANIZATION'S NAME	y a Debtor, check here and enter name of DEBT	OR authorizing this Amendment.	TOODION WHICH
For Alarm 1a Dona 1a	Brooklane DR. N	in this Al 3	ドアノス
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
10.OPTIONAL FILER REFERENCE DATA			