



UCC FINANCING STATEMENT AMENDI	NENT			
OLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional]				
Tonya Grimes				
B. SEND ACKNOWLEDGMENT TO: (Name and Address)				
Bank of Alabama				
P. O. Box 59587				
Birmingham, AL 35209				
		ABOVE SPACE IS FOR FILING OFFICE U	SE ONLY	
1a. INITIAL FINANCING STATEMENT FILE #		1b. This FINANCING STATEME	NT AMENDMENT is	
998-31626		to be filed [for record] (or re- REAL ESTATE RECORDS.	to be filed [for record] (or recorded) in the REAL ESTATE RECORDS.	
2. TERMINATION: Effectiveness of the Financing Statement identifie		ب المنظم الم		
3. CONTINUATION: Effectiveness of the Financing Statement iden continued for the additional period provided by applicable law.	tified above with respect to security interest(s)	of the Secured Party authorizing this Continuation	Statement is	
4. ASSIGNMENT (full or partial): Give name of assignee in item 7a o	r 7b and address of assignee in item 7c; and als	so give name of assignor in item 9.		
5. AMENDMENT (PARTY INFORMATION): This Amendment affect		Check only <u>one</u> of these two boxes.		
Also check one of the following three boxes and provide appropriate inform		ive record name — FTI ADD name: Complete item	n 7a or 7b, and also	
CHANGE name and/or address: Give current record name in item 6a name (if name change) in item 7a or 7b and/or new address (if address	s change) in item 7cto be deleted in ite	am 6a or 6b. ADD name: Complete item 7c; also complete item	ns 7d-7g (if applicable)	
6. CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME	······································			
Lindsey Development Company, LL	С			
OR 6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
7. CHANGED (NEW) OR ADDED INFORMATION:				
7a. ORGANIZATION'S NAME				
OR 7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
7 D. HADIVIDOME O EMOT TAMBLE				
7c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY	
		TION ODCANIZATIONAL ID# if a		
7d. TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR	TION 7f JURISDICTION OF ORGANIZA	TION 7g. ORGANIZATIONAL ID#, if a	ny NON	
8. AMENDMENT (COLLATERAL CHANGE): check only one box.				
Describe collateral X deleted or added, or give entire restate	ed collateral description, or describe collateral	assigned.		
PARTIAL RELEASE:			. ~=	
Lot 110, according to the Survey of S				
Page 24 A, B, & C, in the probate offi	ce of Shelby County, Ala	abama; being situated in S	heiby	
County, AL				
	THIS ANAENIDMENIT (of occionos if this	is an Assignment). If this is an Amendment authori	zed by a Debtor which	
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING adds collateral or adds the authorizing Debtor, or if this is a Termination		er name of DEBTOR authorizing this Amendment.	zea by a boblet titllet.	
9a. ORGANIZATION'S NAME				
Bank of Alabama				
96 INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
10. OPTIONAL FILER REFERENCE DATA				