



20030806000509930 Pg 1/2 .00
Shelby Cnty Judge of Probate, AL
08/06/2003 08:30:00 FILED/CERTIFIED

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

AGRICREDIT ACCEPTANCE COMPANY
PO BOX 3794
URBANDALE IA 50323

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE #

2000-35583 10-12-00 SHELBY COUNTY JUDGE OF PROBATE

1b. This FINANCING STATEMENT AMENDMENT is
to be filed [for record] (or recorded) in the
REAL ESTATE RECORDS.

2. ☒ **TERMINATION:** Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement.

3. ☐ **CONTINUATION:** Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law.

4. ☐ **ASSIGNMENT** (full or partial): Give name of assignee in item 7a or 7b and address of assignee in item 7c; and also give name of assignor in item 9.

5. **AMENDMENT (PARTY INFORMATION):** This Amendment affects ☐ Debtor or ☐ Secured Party of record. Check only one of these two boxes.

Also check one of the following three boxes and provide appropriate information in items 6 and/or 7.

☐ **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 7b, and also item 7c;
also complete items 7e-7g (if applicable).

6. **CURRENT RECORD INFORMATION:**

6a. ORGANIZATION'S NAME

OR

6b. INDIVIDUAL'S LAST NAME

BENTLEY

FIRST NAME

ALAN

MIDDLE NAME

R

SUFFIX

7. **CHANGED (NEW) OR ADDED INFORMATION:**

7a. ORGANIZATION'S NAME

OR

7b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

7c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

7d. **SEE INSTRUCTIONS**

ADD'L INFO RE
ORGANIZATION
DEBTOR

7e. TYPE OF ORGANIZATION

7f. JURISDICTION OF ORGANIZATION

7g. ORGANIZATIONAL ID #, if any

☐ NONE

8. **AMENDMENT (COLLATERAL CHANGE):** check only one box.

Describe collateral ☐ deleted or ☐ added, or give entire ☐ restated collateral description, or describe collateral ☐ assigned.

9. **NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT** (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here ☐ and enter name of DEBTOR authorizing this Amendment.

9a. ORGANIZATION'S NAME

AGRICREDIT ACCEPTANCE LLC

OR

9b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

10. **OPTIONAL FILER REFERENCE DATA**

SJBH TERMINATION ALAN R BENTLEY 101-200849

STATE OF ALABAMA — UNIFORM COMMERCIAL CODE — FINANCING STATEMENT
FORM UCC-1 ALA.

Important: Read Instructions on Back Before Filing out Form.

REORDER FROM
Register, Inc.
141 PINE ST.
P.O. BOX 710
ANN ARBOR, MI 48103
800 481-1710

92211

☐ The Debtor is a nonresiding entity as defined in ALA CODE 7-9-104pg. No of Additional Sheets Presented -0- This FINANCING STATEMENT is presented to a Filing Office for filing pursuant to the Uniform Commercial Code.

1. Return copy or recorded original acknowledgment to:
Agricredit Acceptance, LLC.
P.O. Box 7902
Des Moines, Iowa 50322-9402

THIS SPACE FOR USE OF FILING OFFICE
Date, Time, Number & Filing Office

20030806000509930 Pg 2/2 .00
Shelby Cnty Judge of Probate, AL
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Pre-paid Acct # _____
2. Name and Address of Debtor (Last Name First if a Person)

Bentley, Alan R.
P.O. Box 1021
CalERA, AL 35040

Social Security/Tax ID # _____
3A. Name and Address of Debtor (if ANY) (Last Name First if a Person)

Social Security/Tax ID # _____
☐ Additional debtors on attached UCC-1

3. NAME AND ADDRESS OF SECURED PARTY (Last Name First if a Person)

Jemison Tractor
P.O. Box 1209
Jemison, Alabama 35085

Social Security/Tax ID # _____
☐ Additional secured parties on attached UCC-1

FILED WITH: Shelby

4. NAME AND ADDRESS OF ASSIGNEE OF SECURED PARTY (if ANY) (Last Name First if a Person)

AGRICREDIT ACCEPTANCE LLC
P.O. Box 7902
Des Moines, IA 50322-9402

5. The Financing Statement Covers the Following Types (or Items) of Property:

One-Mahindra 4110 tractor; serial number 411S100046

6A. Enter Codes From Back of Form That Best Describe The Collateral Covered By This Filing

300	---
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---	---
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Check if covered: ☐ Products of Debtor are also covered.

6. This statement is filed without the debtor's signature to perfect a security interest in collateral (check X, if not)

☐ already subject to a security interest in another jurisdiction when it was brought into this state

☐ already subject to a security interest in another jurisdiction when debtor's location changed to this state

☐ which is proceeds of the original collateral described above in which a security interest is perfected

☐ acquired after a change of name, identity or corporate structure of debtor

☐ as to which the filing has lapsed.

7. Complete only when filing with the Judge of Probate:
The initial indebtedness secured by this financing statement is \$ 174
Mortgage tax due (10¢ per \$1000) or fraction thereof \$ 17.40

☐ This financing statement covers timber to be cut, crops, or fixtures and is to be cross indexed in the real estate mortgage records (Describe real estate and if debtor does not have an interest of record, give name of record owner in Box 3)

By: _____
Signature of Debtor(s)

Signature of Debtor(s)

Alan R. Bentley
Type Name of Debtor(s)

By: X _____
Signature of Secured Party(ies) or Assignee (title)

Signature of Secured Party(ies) or Assignee

Jemison Tractor
Type Name of Individual or Business