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

89277 IMPORTANT — READ INSTRUCTIONS ON BACK BEFORE FILLING OUT FORM — DO NOT DETACH STUB

			Shelby	19000629580 Pg 1/ Cnty Judge of Pr 2003 07:57:00 FIL	obate, HL
	S (SCORT AND LANGE CAREELING)	DMENT			
	S (front and back) CAREFULLY CONTACT AT FILER [optional]				
	NACNIT TO: Alexand Address N				
Devaney 3285 Hwy	MENT TO: (Name and Address) Gena C. y 10 110, AL 35115				
STMHD# 8	72811 Talladega Cty	AL THE A	BOVE SPACE IS FO	OR FILING OFFICE US	EONLY
. INITIAL FINANCING STATEMENT FILE # County# 156560 8/12/88				is FINANCING STATEMEN be filed [for record] (or rec	
		ntified above is terminated with respect to security intere		be filed [for record] (or record) EAL ESTATE RECORDS. arty authorizing this Termina	
. CONTINUATION: E	Effectiveness of the Financing Statement	identified above with respect to security interest(s) of t			
	tional period provided by applicable law.				
		7a or 7b and address of assignee in item 7c; and also g			
	r INFORMATION): This Amendment at wing three boxes <u>and</u> provide appropriate in	ffects Debtor or Secured Party of record. Cl	ieck only <u>one</u> of these	two boxes.	
CHANGE name and/or	raddress: Please refer to the detailed instruction the name/address of a party.		ADD item	name: Complete item 7a o 7c: also complete items 7e	or 7b, and also 2-7g (if applicable).
CURRENT RECORD IN	FORMATION:				
6a. ORGANIZATION'S N	IAME				
R 65. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	NAME	SUFFIX
Devaney		Gene	C		
. CHANGED (NEW) OR A	DDED INFORMATION:		· · · · · ·		• • • • • • • • • • • • • • • • • • •
7a. ORGANIZATION'S N	IAME				
OR 76. INDIVIDUAL'S LAST	NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
70. INDIVIDUALS LAST NAME					
_		CITY	STATE	POSTAL CODE	COUNTRY
c. MAILING ADDRESS		10111	4		
c. MAILING ADDRESS					
	ADD'L INFO RE 7e. TYPE OF ORGAN ORGANIZATION		N 7g. ORG	SANIZATIONAL ID #, if any	 1
c. MAILING ADDRESS d. SEE INSTRUCTIONS 3. AMENDMENT (COLLA	ORGANIZATION DEBTOR	NIZATION 7f. JURISDICTION OF ORGANIZATIO	N 7g. ORG	SANIZATIONAL ID #, if any	NON
d. SEE INSTRUCTIONS AMENDMENT (COLLA	ORGANIZATION DEBTOR TERAL CHANGE): check only one box	NIZATION 7f. JURISDICTION OF ORGANIZATIO		SANIZATIONAL ID #, if any	 1
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d. SEE INSTRUCTIONS AMENDMENT (COLLA Describe collateral dei	ORGANIZATION DEBTOR ATERAL CHANGE): check only one box leted or added, or give entire res	X. stated collateral description, or describe collateral	assigned.		NO.
d. SEE INSTRUCTIONS AMENDMENT (COLLA Describe collateral del	ORGANIZATION DEBTOR ATERAL CHANGE): check only one box leted or added, or give entire reserved.	NIZATION 7f. JURISDICTION OF ORGANIZATIO	assigned. Assignment). If this is	an Amendment authorized	NO
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d. SEE INSTRUCTIONS AMENDMENT (COLLA Describe collateral del AME OF SECURED adds collateral or adds the 9a. ORGANIZATION'S N SOUTHTUS	ORGANIZATION DEBTOR ATERAL CHANGE): check only one box letted or added, or give entire research research research authorizing Debtor, or if this is a Termination research re	ALCATION 7f. JURISDICTION OF ORGANIZATION A. Stated collateral description, or describe collateral G THIS AMENDMENT (name of assignor, if this is aron authorized by a Debtor, check here and enter na	assigned. Assignment). If this is me of DEBTOR authorized	an Amendment authorized prizing this Amendment.	d by a Debtor which
AMENDMENT (COLLA Describe collateral del del adds collateral or adds the SouthTrus SouthTrus	ORGANIZATION DEBTOR ATERAL CHANGE): check only one box letted or added, or give entire research research research authorizing Debtor, or if this is a Termination research re	AVIZATION 7f. JURISDICTION OF ORGANIZATION K. Stated collateral description, or describe collateral G THIS AMENDMENT (name of assignor, if this is an	assigned. Assignment). If this is	an Amendment authorized prizing this Amendment.	