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

important — read instructions on back before filling out form — do not detach stub 32577

UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME a PHONE OF CONTACT AT FILER (potional) B. SEND ACKNOWLEDGMENT TO: (Name and Address) First Commercial Bank PO Box 11746 Birmingham, Al. 35202 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1a. INITIAL FINANCING STATEMENT FILE # 2001-06797 Shelby County 1b. The FINANCING STATEMENT AMENOM 2001-06797 Shelby County 1c. STERMINATION: Effectiveness of the Financing Statement disdrifted above is terminated with respect to security interest(s) of the Secured Party authorizing this Continuation Statement as a continued for the additional period provided by applicable law. 4. SESIGNMENT (full or partial): Give name of assignee in flow 7a or 7b and address of assignee in Rem 7c, and also give name of assigner in Rem 9. 5. AMENDMENT (FARTY INFORMATION): This Amendment affects Debtor or Secured Party or record. Check only one of these two bases. Also check gas of the following these baces gaig provide applicables information in Internet 8 and/or 7. GUANCET name and/or address. Please refer to the detailed instructions of the Geological Remark of the secured Party of record. Check only one of these two bases. Also check gas of the following these baces gaig provide applicables information in Internet 8 and/or 7. GUANCET name and/or address. Please refer to the detailed instructions of the GRANIZATION AMERICAN STAME OR 75. INDIVIDUAL'S LAST NAME FIRST NAME FIRST NAME MIDDLE NAME MIDDLE NAME SUFFL 76. MALING ADDRESS AND ADDRESS ADDITIONS THE POSTAL CODE FORM ADDRESS TO THE POSTAL CODE COUNTY 76. SEE INSTRUCTIONS NAME FIRST NAME MIDDLE NAME FIRST NAME MIDDLE NAME SUFFL 76. MALING ADDRESS ADDITIONS TABLE TO THE POSTAL CODE COUNTY 76. DAGRANIZATIONS NAME FIRST NAME MIDDLE NAME FIRST NAME MIDDLE NAME FIRST NAME MIDDLE NAME SUFFL 76. DAGRANIZATIONS TABLE FIRST NAME FIRST NAME FIRST NAME MIDDLE NAME FIRST NAME MIDDLE NAME FIRST NAME FIRST NAME FIRST NAME MIDDLE NAME FIRST NAME MIDDLE NAME F
E. SEND ACKNOWLEDGMENT TO: (Name and Address) First Commercial Bank PO Box 11746 Birmingham, AL 35202 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1a. NITIAL FINANCING STATEMENT FILE # 2001-06797 Shelby County 2. If TERMINATION: Effectiveness of the Financing Statement Identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination 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 assigner in item 8. 5. AMENDMENT (FARTY 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 8 and/or. CHAMSE one and/or address: Please steet in the detailed instructions 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 8 and/or. CHAMSE one and/or address: Please steet on the detailed instructions 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 8 and/or. CHAMSE one and/or address: Please steet on the detailed instructions Debtor or Secured Party of record. Check only one of these two boxes. ADD name. Complete flow or 2 or 7b, and also intensity to the provide flow or 2 or 7b, and also
First Commercial Bank PO Box 11746 Birmingham, AL 35202 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1a. INITIAL FINANCING STATEMENT FILE # 2001—06797 Shelby County TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement is continued for the additional period provided by applicable law. 4. [ASSIGNMENT (full or partial): Olive 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 First Ordinary of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law. 4. [ASSIGNMENT (full or partial): Olive 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 gap of the following three boxes ang provide appropriate information in items 6 and/or 1. [CHANGE name and/or address: Please refer to the detailed instructions in items 6 and/or 1. [CHANGE name and/or address: Please refer to the detailed instructions for be deleted in item 8a or 6b. [Termination Statement 1.] [CHANGE name and/or address: Please refer to the detailed instructions for be deleted in item 8a or 6b. [Termination Statement 1.] [CHANGE name and/or address: Please refer to the detailed instructions for be deleted in item 8a or 6b. [Termination Statement 1.] [CHANGE name and/or address: Please refer to the detailed instructions for the manual detailed in item 8a or 6b. [Termination Statement 1.] [CHANGE name and/or address: Please refer to the detailed instructions for the manual detailed in item 8a or 6b. [Termination Statement 1.] [CHANGE name and/or address: Please refer to the detailed instructions for the manual det
First Commercial Bank PO Box 11746 Birmingham, AL 35202 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1a. INITIAL FINANCING STATEMENT FILE# 2001-06797 Shelby County The Records of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement is continued for the additional period provided by applicable law. 4. ASSIGNMENT (full or partial): Give name of assignee in filem 7a or 7b and address of assignee in Rem 7c; and also give name of assignor in Rem 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 8 and/or 7. CHANGE name and/or address: Please refer to the detailed instructions Debtor or Secured Party or record. Check only one of these two boxes. Also Check one of the following three boxes and provide appropriate information in items 8 and/or 7. CHANGE name and/or address: Please refer to the detailed instructions Debtor or Secured Party or record. Check only one of these two boxes. Source of the following three boxes and provide appropriate information in items 8 and/or 7. CHANGE name and/or address: Please refer to the detailed instructions Debtor or Secured Party or record. Check only one of these two boxes. Source of the following three boxes and provide appropriate information in items 8 and/or 7. CHANGE name and/or address: Please refer to the detailed instructions Debtor or Secured Party or record. Check only one of these two boxes. Source of the following three boxes are provided appropriate information in items 8 and/or 7. CHANGED (NEW) OR ADDED INFORMATION: First Name MIDDLE NAME Supplies
1a. INITIAL PINANCING STATEMENT FILE # 2001-06797 Shelby County 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 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 8 and/or 7. CHANGE name and/or address: Please refer to the detailed instructions in regards to changing the name/address of a party. 6. CURRENT RECORD INFORMATION: Sa. ORGANIZATION'S NAME 7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME FIRST NAME FIRST NAME MIDDLE NAME SUFFIX 7b. INDIVIDUAL'S LAST NAME FIRST NAME FIRST NAME MIDDLE NAME SUFFIX 7c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTY CO
1a. INITIAL FINANCING STATEMENT FILE # 2001-06797 Shelby County TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination 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 before a 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 before a full or partial): Give name of assignee in item 9. 5. AMENDMENT (PARTY INFORMATION): This Amendment affects before a full or partial): Give name and/or address: Please refer to the detailed instructions in items 8 and/or 7. CHANGE name and/or address: Please refer to the detailed instructions be deleted in item 6a or 6b. 6. CURRENT RECORD INFORMATION: 8a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX 7c. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME FIRST NAME FIRST NAME MIDDLE NAME SUFFIX 7c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTY COUNTY STATE PROTED CODE COUNTY COUN
TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement is 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 DELETE name: Give record name In regards to changing the name/address of a party. 6. CURRENT RECORD INFORMATION: 8a. ORGANIZATION'S NAME OR 7b. INDIVIDUAL'S LAST NAME FIRST NAME FIRST NAME MIDDLE NAME MIDDLE NAME SUFFIX To. MAILING ADDRESS CITY STATE POSTAL CODE COUNTINUATION: STATE POSTAL CODE COUNTINUATION: COUNTINUATION: CONTINUED ON The Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law. The Secured Party authorizing this Continuation Statement is continued for the additional period party authorizing this Continuation Statement is continued for the additional period party authorizing this Continuation Statement is continued for the additional period party authorizing this Continuation Statement is continued for the additional period party authorizing this Continuation Statement is continued for the additional period party authorizing the secure of the secu
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 gaing provide appropriate information in items 8 and/or 7. CHANGE name and/or address: Please refer to the detailed instructions Delete name. Give record name in regards to changing the name/address of a party. 6. CURRENT RECORD INFORMATION: 8a. ORGANIZATION'S NAME OR 7b. INDIVIDUAL'S LAST NAME FIRST NAME FIRST NAME MIDDLE NAME SUFFIX 7c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTINUE
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. 6. CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME Villas Belvedere, LLC 8b. INDIVIDUAL'S LAST NAME FIRST NAME FIRST NAME MIDDLE NAME SUFFIL 7c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTIED THE COUNTIED TO THE POSTAL CODE COUNTIED TO THE POSTAL CO
5. AMENDMENT (PARTY INFORMATION): This Amendment affects Debtor or 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 ADD name: Complete item 7a or 7b, and also in regards to changing the name/address of a party. 6. CURRENT RECORD INFORMATION: 8a. ORGANIZATION'S NAME V111as Belvedere, LLC 8b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX 7c. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME OR 7b. INDIVIDUAL'S LAST NAME FIRST NAME FIRST NAME MIDDLE NAME SUFFIX CITY STATE POSTAL CODE COUNTY
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. CHANGE name and/or address: Please refer to the detailed instructions in regards to changing the name/address of a party. CHANGE INFORMATION: 6a. ORGANIZATION'S NAME Villas Belvedere, LLC 8b. INDIVIDUAL'S LAST NAME FIRST NAME FIRST NAME MIDDLE NAME SUFFIX OR 7b. INDIVIDUAL'S LAST NAME FIRST NAME FIRST NAME MIDDLE NAME SUFFIX CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME OR 7b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX CITY STATE POSTAL CODE COUNTY
CHANGE name and/or address: Please refer to the detailed instructions in regards to changing the name/address of a party. 6. CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME Villas Belvedere, LLC 8b. INDIVIDUAL'S LAST NAME 7c. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME OR 7b. INDIVIDUAL'S LAST NAME FIRST NAME FIRST NAME FIRST NAME MIDDLE NAME SUFFL 7c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTIER ADD name: Complete item 7a or 7b, and also to 7b, and
6a. ORGANIZATION'S NAME Villas Belvedere, LLC 6b. INDIVIDUAL'S LAST NAME Ta. ORGANIZATION'S NAME OR 7b. INDIVIDUAL'S LAST NAME FIRST NAME FIRST NAME FIRST NAME MIDDLE NAME SUFFIL To. MAILING ADDRESS CITY STATE POSTAL CODE COUNTINE C
Villas Belvedere, LLC 6b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX 7c. MAILING ADDRESS FIRST NAME FIRST NAME FIRST NAME MIDDLE NAME SUFFIX STATE POSTAL CODE COUNTY C
7. CHANGED (NEW) OR ADDED INFORMATION: Ta. ORGANIZATION'S NAME
7a. ORGANIZATION'S NAME OR 7b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIL 7c. MAILING ADDRESS CITY STATE POSTAL CODE COUNT
7a. ORGANIZATION'S NAME OR 7b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIL 7c. MAILING ADDRESS CITY STATE POSTAL CODE COUNT
OR 7b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFLE 7c. MAILING ADDRESS CITY STATE POSTAL CODE COUNT
76. INDIVIDUAL'S LAST NAME SUFFI. 7c. MAILING ADDRESS CITY STATE POSTAL CODE COUNT
7d. SEE INSTRUCTIONS ADD'L INFO RE 7e. TYPE OF ORGANIZATION 7f. JURISDICTION OF ORGANIZATION 7g. ORGANIZATIONAL ID #, if any
ORGANIZATION '
DEBTOR
8. AMENDMENT (COLLATERAL CHANGE): check only <u>one</u> box. Describe collateral deleted or added, or give entire restated collateral description, or describe collateral assigned.
Describe collateral
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
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
First Commercial Bank
9b. INDIVIDUAL'S LAST NAME SUFFI)
10, OPTIONAL FILER REFERENCE DATA