



10/29/2003 13:26:00 FILED/CERTIFIED

|   | ONTACT AT FILER [optional]   |  |                            |  |                   |
|---|--|--|----------------------------|--|-------------------|
| C. C. BARGER 205                              | MENT TO: (Name and Address)  |  |                            |  |                   |
| <u> </u>                                      | POWER COMPANY  |  |                            |  |                   |
|   | 18TH STREET<br>M, AL 35291   |  |                            |  |                   |
|   |  | THE ABOVE S  | PACE IS F                  | OR FILING OFFICE US  | F ONLY            |
| a. INITIAL FINANCING STAT<br>211209190004525  |  |  | 1b. T                      | his FINANCING STATEMEN<br>be filed [for record] (or rec  | IT AMENDMEN       |
|   | ectiveness of the Financing Statement identified above   | is terminated with respect to security interest(s) of th | سن <u>ا</u> لانتار ماسیاند | EAL ESTATE RECORDS. Party authorizing this Termina   | ation Statement.  |
| CONTINUATION: E                               | ffectiveness of the Financing Statement identified about onal period provided by applicable law.   |  | <del></del>                | <u>-</u>   |                   |
|   | or partial): Give name of assignee in item 7a or 7b and  | ·——·——· <del>—</del>                                     |                            | وننيي منى سير سين سيفي سالنب النب النب النب  |                   |
|   | INFORMATION): This Amendment affects Define three boxes and provide appropriate information in   |  | one of thes                | e two boxes.   |                   |
| CHANGE name and/or                            | address: Give current record name in item 6a or 6b; ais  | so give new TIDELETE name: Give record na                |                            | ADD name: Complete item i  | 7a or 7b, and als |
| name (if name change)  CURRENT RECORD INF     | in item 7a or 7b and/or new address (if address change   | e) in item 7c. to be deleted in item 6a or 6b.           |                            | tem 7c; also complete items  | 7d-7g (if applica |
| 6a. ORGANIZATION'S N                          |  |  | · <del>-</del>             |  |                   |
| R 66. INDIVIDUAL'S LAST                       | NAME   | FIRST NAME   | MIDDL                      | E NAME   | SUFFIX            |
| MCNUTT  |  | ERIC   | K                          | K  |                   |
| . CHANGED (NEW) OR A                          | DDED INFORMATION:  | <u></u>  |                            |  |                   |
| 7a. ORGANIZATION'S N.                         |  |  |                            |  |                   |
| 7b. INDIVIDUAL'S LAST                         | NAME   | FIRST NAME   | JMIDDL                     | E NAME   | JSUFFIX           |
| MCNUTT  |  | KARA   | P                          |  |                   |
| MAILING ADDRESS                               |  | CITY   | STATE                      | POSTAL CODE  | COUNTR            |
| 2705 BRAELINN P                               | KWY. N, #69  | HELENA   | AL                         | 35080  |                   |
|   | ADD'L INFO RE 7e. TYPE OF ORGANIZATION   | 7f. JURISDICTION OF ORGANIZATION                         | 7g. OF                     | GANIZATIONAL ID #, if any  |                   |
| d. TAX ID #: SSN OR EIN                       | ORGANIZATION ' DEBTOR I  |  | •                          | والمناوات والمناج والمناوات والمناوات والمناوات والمناوات والمناوات والمناوات والمناوات والمناوات والمناوات وا |                   |
| AMENDMENT (COLLA                              | TERAL CHANGE): check only one box.   |  |                            |  |                   |
| AMENDMENT (COLLA                              | DEBTOR   | ral description, or describe collateral assigne          | 1.                         |  |                   |
| AMENDMENT (COLLA                              | TERAL CHANGE): check only one box.   | ral description, or describe collateral assigne          |                            |  |                   |
| AMENDMENT (COLLA                              | TERAL CHANGE): check only one box.   | ral description, or describe collateral assigned         |                            |  |                   |
| AMENDMENT (COLLA Describe collateral dele     | TERAL CHANGE): check only one box.  eted or added, or give entire restated collate.  PARTY OF RECORD AUTHORIZING THIS AM authorizing Debtor, or if this is a Termination authorized.                 | SENDMENT (name of assignor, if this is an Assign         | nent). If this             |  | d by a Debtor wh  |
| AMENDMENT (COLLA Describe collateral dele     | TERAL CHANGE): check only one box.  eted or added, or give entire restated collate.  PARTY OF RECORD AUTHORIZING THIS AM authorizing Debtor, or if this is a Termination authorized.                 | SENDMENT (name of assignor, if this is an Assign         | nent). If this             |  | d by a Debtor wh  |
| NAME OF SECURED adds collateral or adds the a | TERAL CHANGE): check only one box.  eted or added, or give entire restated collate.  PARTY OF RECORD AUTHORIZING THIS AM authorizing Debtor, or if this is a Termination authorized AME  WER COMPANY | SENDMENT (name of assignor, if this is an Assign         | nent). If this             |  | d by a Debtor wh  |