NATIONAL UCC FINANCING STATEMENT AMENDMENT (FORM UCC3) (REV. 07/29/98)

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

		20031031000727930 Pg 1/ Shelby Cnty Judge of Pro	obate,AL
UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY		10/31/2003 14:05:00 FIL	ED/CERTIFIED
A. NAME & PHONE OF CONTACT AT FILER [optional] B. SEND ACKNOWLEDGMENT TO: (Name and Address)			
Alagasco			
1a. INITIAL FINANCING STATEMENT FILE #		ACE IS FOR FILING OFFICE USE	
1945-10916		1b. This FINANCING STATEMENT to be filed [for record] (or record REAL ESTATE RECORDS.	ed) in the
 TERMINATION: Effectiveness of the Financing Statement identified above is CONTINUATION: Effectiveness of the Financing Statement identified above continued for the additional period provided by applicable law. 			
4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and ac		f assignor in item 9.	
5. AMENDMENT (PARTY INFORMATION): This Amendment affects Deb Also check one of the following three boxes and provide appropriate information in its CHANGE name and/or address: Give current record name in item 6a or 6b; also name (if name change) in item 7a or 7b and/or new address (if address change)	ems 6 and/or 7. give new DELETE name: Give record name		or 7b, and also l-7g (if applicable).
6. CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME	· · · · · · · · · · · · · · · · · · ·		
6b. INDIVIDUAL'S LAST NAME HOOOL	FIRST NAME, HORCE	MIDDLE NAME	SUFFIX
7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME			
OR 7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
5300 HOULDST RE TO THE ORGANIZATION ORGANIZATION	TENTING MEANIZATION 7f. JURISDICTION OF ORGANIZATION	STATE POSTAL CODE 135242 7g. ORGANIZATIONAL ID #, if any	COUNTRY
DEBTOR 8. AMENDMENT (COLLATERAL CHANGE): check only one box.			NONE
Describe collateral deleted or added, or give entire restated collateral	I description, or describe collateral assigned.		
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMEI adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by	NDMENT (name of assignor, if this is an Assignme y a Debtor, check here and enter name of DEE	nt). If this is an Amendment authorized by STOR authorizing this Amendment.	a Debtor which
9a. ORGANIZATION'S NAME OR OR OR OR OR OR OR OR OR O			
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
10. OPTIONAL FILER REFERENCE DATA			