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Shelby Cnty Judge of Probate, AL 01/06/2004 11:03:00 FILED/CERTIFIED

UC	C FINANCING	STATEMENT						
FOL	LOW INSTRUCTIONS	(front and back) CAREFULLY	<u> </u>					
A. N	NAME & PHONE OF CO	ONTACT AT FILER [optional]						
B. 5	SEND ACKNOWLEDGE	MENT TO: (Name and Address)						
					•			
•								
	1							
	1				THE ABOVE	SPACE IS FO	R FILING OFFICE USE	ONLY
1. C	EBTOR'S EXACT FL	JLL LEGAL NAME - insert only one det	otor name (1a or	1b) - do not abbrev				
	18. ORGANIZATION'S NA			127 20 11-01 40-01-01			<u> </u>	, ;
	,							
OR	16. INDIVIDUAL'S LAST	IAME		FIRST NAME		MIDDLE	NAME	SUFFIX
		Movis		(1)	lifford			
1c. N	MUNGADDRESS			CITY /		STATE	POSTAL CODE	COUNTRY
	45 501	Ahern Hills	1)		PNO	AL	35040	US
1d. T	AX ID #: SSN OR EIN	ADD'L INFO RE 16. TYPE OF ORGAN	NIZATION	11. JURISDICTION	OF ORGANIZATION	1g. ORG	ANIZATIONAL ID #, if any	
		ORGANIZATION DEBTOR				1		NONE
2. A	DDITIONAL DEBTOR	SEXACT FULL LEGAL NAME - ins	sert only one det	tor name (2a or 2b)	- do not abbreviate or comb	ine names	" 	
,	28. ORGANIZATION'S NA			<u></u>			· · · · · · · · · · · · · · · · · · ·	
OH	2b. INDIVIDUAL'S LAST NAME			FIRST NAME		MIDDLE NAME		SUFFIX
					* +			
2c. N	AAILING ADDRESS			CITY	(4	STATE	POSTAL CODE	COUNTRY
					, i e d	AL		US
2d. TAX ID #: SSN OR EIN ADD'L ÎNFO RE 20. TYPE OF ORGANIZATION		NIZATION	21. JURISDICTION	OFORGANIZATION	2g. ORG	ANIZATIONAL ID #, if any	*	
		ORGANIZATION DEBTOR		1				NONE
3. S	ECURED PARTY'S	NAME (or NAME of TOTAL ASSIGNEE	of ASSIGNOR S	/P) - insert only <u>one</u>	secured party name (3a or	3 b)		
	3a. OFIGANIZATION'S NA			•	·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·			
OR	ALABAMA PO						·	
On	3b. INDIVIDUAL'S LAST I	IAME		FIRST NAME		MIDDLE	NAME	SUFFIX
					·································			
3c. MAILING ADDRESS			CITY		STATE	POSTAL CODE	COUNTRY	
600 N. 18TH STREET				BIRMING	IAM	AL	35291	US
4. T	his FINANCING STATEME	NT covers the following colleteral:						
	THE THAT I ARE	ነ <u>ነ</u> ነር የነር ልጣ፣ ከተማኔመን የሚመታውጣ፣	T TT7 A CT TE74	ב ביני איז איזעט	י אירואים לו כו קונאיף יף	CTC T AAA	محمر خلالسلام حائما	איייטרער
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BRAND: Amana M# RHE42C2A

S# P1248205C

MH CHA 42TCC S# D1203805C

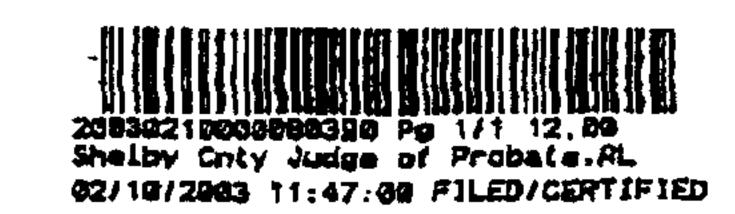
5. ALTERNATIVE DESIGNATION [if applicable]:	LESSEE/LESSOR	CONSIGNEE/CONSIGNO	BAILEE/BAILOR	SELLER/BUYER	AG. LIEN	NON-UCC FILING
6. This FINANCING STATEMENT is to be filed [I ESTATE RECORDS. Attach Addendum		the REAL 7. Check to family applicable [ADDITIO]	REQUEST SEARCH REPONAL FEET	ORT(S) on Debtor(s) [optional]	All Debtors	Debtor 1 Debtor 2
A OPTIONAL FILER REFERENCE DATA						

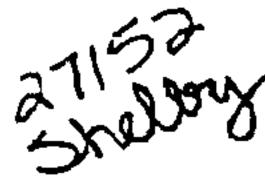
UCC FINANCI FOLLOW INSTRUCTION		ENTADDENDUM			•		
	EBTOR (1a or 1b)	ON RELATED FINANCING STA	TEMENT				
96. INDIVIDUAL'S L	AST NAME	FIRST NAME TOO	MIDDLE NAME, SUFFIX				
10. MISCELLANEOUS							
`				THE ABOVE	SPACE	IS FOR FILING OFFI	CE USE ONLY
11. ADDITIONAL DEE		L LEGAL NAME - insert only one r	name (11a or 11b) - do not abbrev	viate or combine name	95		
OR 11b. INDIVIDUAL'S L	AST NAME		FIRST NAME		MIDDLE	NAME	SUFFIX
11c. MAILING ADDRESS		<u></u>	CITY		STATE	POSTAL CODE	COUNTRY
11d. TAX ID #: SSN OR	EIN ADD'L INFO RE ORGANIZATION DEBTOR	11e. TYPE OF ORGANIZATION	11f. JURISDICTION OF ORGA	NIZATION	11g. ORG	ANIZATIONAL ID #, if a	ny Non
12. ADDITIONAL S 12a. ORGANIZATION	SECURED PARTY	'S of ASSIGNOR S/P'S	NAME - insert only one name	(12a or 12b)			
12b. INDIVIDUAL'S L	AST NAME		FIRST NAME	. 	MIDDLE	NAME	SUFFIX
12c. MAILING ADDRESS	-, ; ; ; ;		CITY	- , , , , , , , , , , , , , , , , , , ,	STATE	POSTAL CODE	COUNTRY
13. This FINANCING STA collateral, or is filed a 14. Description of real es	as a fixture filing.	mber to be cut or as-extracted	16. Additional collateral descri	iption:			
15. Name and address o	f a RECORD OWNER of	above-described real estate	•				
(if Debtor does not ha	tve a record interest):						
			17. Check only if applicable and Debtor is a Trust or 18. Check only if applicable and	Trustee acting with re	spect to p	roperty held in trust or	Decedent's Estate
		Debtor is a TRANSMITTING UTILITY Filed in connection with a Manufactured-Home Transaction — effective 30 years					
			Filed in connection with a	Public-Finance Trans	action — e	fective 30 years	

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200401060000009790 Pg 3/3 39.75 Shelby Cnty Judge of Probate, AL

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01/06/2004 11:03:00 FILED/CERTIFIED

This instrument was prepared by:

Alan C. Keith Attorney 2100 Lynnga e Drive Birmingham, Nabama 35216 Send tax notice to:

Clifford Lowell Davis 45 Southern Hills Drive Calera, AL 35040

QUITCLAIM DEED

SOT Deed BK 1999 pg. 29425

THE STATE OF ALABAMA SHELBY COUNTY

VALUE \$1,000.00

KNOW ALL MEN BY THESE PRESENTS, That for and in consideration of the sum of Ten and 00/100 (\$10.00) Doll ars, in hand paid to the undersigned, the receipt whereof is hereby acknowledged, the undersigned ereby releases, quitclaims, grants, sells, and conveys to Clifford Lowell Davis (hereinafter called Grantee), all reir right, title, interest and claim in or to the following described real estate situated in SHELBY County, Alabi ma, to-wit:

Lot 1, according to the Survey of Southern Hills, as recorded in Map Book 7, Page 72, in the Probate Office of Shelby County, Alabama; being situated in Shelby County, Alabama.

Subject to all rights of way, easements, covenants and restrictions of record.

Subject to current year ad valorem taxes, which are not yet due and payable.

TO HAVE AND TO HOLD to said GRANTEE forever. Given under our hand and seal on this January 30.

Wit Till Hele Killer

STATE OF LABAMA SHELBY COUNTY

I, the under ligned, a Notary Public in and for said County, in said State, hereby certify that Paula Michelle Davis, a single woman, whose name(s) is signed to the foregoing conveyance, and who is known to me, acknowledged before me on this day that, being informed of the contents of the conveyance, he/she, executed the same voluntarily on the day the same bears date.

Given unde. my hand and official seal on January 2003.

My Commission Expires: 11-05-06

Notary Public