



01/30/2004 15:28:00 FILED/CERTIFIED UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] **Terrie Childress** B. SEND ACKNOWLEDGMENT TO: (Name and Address) **Central State Bank** Post Office Box 180 Calera, Alabama 35040 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1b. This FINANCING STATEMENT AMENDMENT is 1a. INITIAL FINANCING STATEMENT FILE# to be filed [for record] (or recorded) in the 024394 REAL ESTATE RECORDS. 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. 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. 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. DELETE name: Give record name ADD name: Complete item 7a or 7b, and also item to be deleted in item 6a or 6b. 7c; also complete items 7e-7g (if applicable). 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 FIRST NAME 6b. INDIVIDUAL'S LAST NAME MIDDLE NAME SUFFIX Allen Darrell 7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME OR FIRST NAME 76. INDIVIDUAL'S LAST NAME MIDDLE NAME SUFFIX 7c. MAILING ADDRESS CITY POSTAL CODE STATE COUNTRY 10414 Hwy 22 Calera 35040 Al 7d. SEE INSTRUCTIONS 7e. TYPE OF ORGANIZATION ADD'L INFO RE 7f. JURISDICTION OF ORGANIZATION 7g. ORGANIZATIONAL ID #, if any ORGANIZATION NONE DEBTOR 8. AMENDMENT (COLLATERAL CHANGE): check only one box. Describe collateral deleted or added, or give entire restated collateral description, or describe collateral assigned. 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 which 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 Central State Bank 9b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX 10. OPTIONAL FILER REFERENCE DATA

200401300000051350 Pg 2/2 .00 Shelby Cnty Judge of Probate,AL 01/30/2004 15:28:00 FILED/CERTIFIED

UCC FINANCING STAT	EMENT AMENDI	JENT ADDENDUM
FOLLOW INSTRUCTIONS (front and	back) CAREFULLY	
11. INITIAL FINANCING STATEMENTO	T FILE # (same as item 1 on	Amendment form)
12. NAME OF PARTY AUTHORIZI	NG THIS AMENDMENT (s	ame as item 9 on Amendment form)
12a. ORGANIZATION'S NAME		
OR 12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX
Allen	Susan	k

13. Use this space for additional information

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Drepared by: CENTRAL STATE BANK P.O. BOX 180 CALERA, ALABAMA 35040 MCHULIN HO.