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

06363

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

		20040213000074730 Pg Shelby Cnty Judge of 02/13/2004 08:02:00 F	1/1 .00 Probate,AL	
UCC FINANCING STATEMENT AME	NDMENT			
FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional]				
B. SEND ACKNOWLEDGMENT TO: (Name and Address)				
MEEKER, DAVID 5254 A CAHABA VALLEY RD BIRMINGHAM, AL 35124				
STMHD# 906457 SHELBY CTY AT	J	OVE SPACE IS FOR FILING OFFICE US	SE ONLY	
1a. INITIAL FINANCING STATEMENT FILE # 24514 Filed on 01/10/1990 SHELB	CTY	1b. This FINANCING STATEME to be filed [for record] (or rec		
2.XX TERMINATION: Effectiveness of the Financing Statement is	lentified above is terminated with respect to security interest	REAL ESTATE RECORDS. (s) of the Secured Party authorizing this Termin	ation Statement.	
3. CONTINUATION: Effectiveness of the Financing Stateme continued for the additional period provided by applicable law		Secured Party authorizing this Continuation	Statement is	
4. ASSIGNMENT (full or partial): Give name of assignee in ite	على بداخل بالمنظل المنظم ا المنظم المنظم			
5. AMENDMENT (PARTY INFORMATION): This Amendment Also check one of the following three boxes and provide appropriate		ck only <u>one</u> of these two boxes.		
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 to be deleted in item 6a or 6b.		ADD name: Complete item 7a item 7c; also complete items 7c	ADD name: Complete item 7a or 7b, and also item 7c; also complete items 7e-7g (if applicable).	
6. CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME		·- ,-· , , , ,, ,, ,, ,,		
OR 66. INDIVIDUAL'S LAST NAME MEEKER	FIRST NAME DAVID	MIDDLE NAME	SUFFIX	
7. CHANGED (NEW) OR ADDED INFORMATION:				
7a. ORGANIZATION'S NAME				
7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
7c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY	
7d. SEE INSTRUCTIONS ADD'L INFO RE 7e. TYPE OF ORG ORGANIZATION DEBTOR	ANIZATION 7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if an	yNONE	
8. AMENDMENT (COLLATERAL CHANGE): check only one I Describe collateral deleted or added, or give entire		ssianed.		
9. NAME OF SECURED PARTY OF RECORD AUTHORIZI	NG THIS AMENDMENT (name of assignor, if this is an A	ssignment). If this is an Amendment authorize	d by a Debtor which	
adds collateral or adds the authorizing Debtor, or if this is a Termina 9a. ORGANIZATION'S NAME SOUTHTRUST BANK	ition authorized by a Debtor, check here and enter name	of DEBTOR authorizing this Amendment.		
OR 96. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
) i)	JOURN	