

02/27/2004 11:20:00 FILED/CERTIFIED

		G STATEMENT AMENDM	ENT				
		S (front and back) CAREFULLY CONTACT AT FILER [optional]					
B.	SEND ACKNOWLED	GMENT TO: (Name and Address)					
1	First C	ommercial Bank					
	PO box						
ł		ham, AL 35202					
	~	TIGHT, TILL JJZUZ					
L			THE ABOV	E SPACE IS FO	OR FILING OFFICE U	JSE ONLY	
1a.	INITIAL FINANCING STA			1b. This FINANCING STATEMENT AMENDMENT is			
	2000–43			RE	be filed (for record) (or re EAL ESTATE RECORDS.	<u> </u>	
2.		ffectiveness of the Financing Statement identified ab					
3.	CONTINUATION:	Effectiveness of the Financing Statement identified itional period provided by applicable law.	above with respect to security interest(s) of the Se	ecured Party auth	norizing this Continuation	Statement is	
4.	ASSIGNMENT (full	or partial): Give name of assignee in item 7a or 7b a	and address of assignee in item 7c; and also give na	ame of assignor in	ı item 9,		
			Debtor or Secured Party of record. Check	only <u>one</u> of these	two boxes.		
		wing three boxes <u>and</u> provide appropriate information 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 7c; also complete items 7	ı or 7b, and also /e-7q (if applicable).	
6 .	CURRENT RECORD IN 6a. ORGANIZATION'S I		······································				
	1	1 Mill, LLP					
OR	6b. INDIVIDUAL'S LAST	·	FIRST NAME	MIDDLE	NAME	SUFFIX	
7.	CHANGED (NEW) OR A	DDED INFORMATION:			-		
	7a. ORGANIZATION'S N			· ·			
OR							
O . (7b. INDIVIDUAL'S LAST	NAME	FIRST NAME	MIDDLE	MIDDLE NAME		
/C.	MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY	
7d	SEE INSTRUCTIONS	ADDIL INFO DE TA-TVOE OF ODGANIZATION	76 11 10 10 0 10 710 11 0 710 11 11 11				
<i>7</i> Q .	SEC IIIS I NOC I ICIAS	ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. ORG	SANIZATIONAL ID #, if an	y	
0 /	MAENIDMENIT (COLL A	DEBTOR				NON	
0. <i>r</i>	AMENDMENT (COLLA	TERAL CHANGE): check only <u>one</u> box. leted or added, or give entire restated coll					
L	escribe consters:	restated coll	ateral description, or describe collateralassig	gned.			
	Partial	Release:					
	Lot 68,	according to the Survey	of Phase Four Caldwell	Crossin	ios 2nd Sact	tor	
	as reco	rded in Map Book 32, pag	ge 7, in the Probate Off	ice of S	helby County	V.	
	Alabama.	•			Trouby Courter	7 3	
	. <u> </u>					. <u>. </u>	
9. N	AME OF SECURED I	PARTY OF RECORD AUTHORIZING THIS A	MENDMENT (name of assignor, if this is an Assig	nment). If this is	an Amendment authorize	d by a Debtor which	
•	9a. ORGANIZATION'S N	authorizing Debtor, or it this is a Termination authoriz	zed by a Debtor, check here and enter name of	DEBTOR author	rizing this Amendment.		
		ommercial Bank					
OR	9b. INDIVIDUAL'S LAST		FIRST NAME	1400 -	NIA NAT	[
				MIDDLE	NAME	SUFFIX	
1.0 0.0	PTIONAL FILER REFERE	NCE DATA					
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