



A. NAME & PHONE OF C	(front and back) ONTACT AT FILE		<u></u>					
B. SEND ACKNOWLEDG	MENT TO: (Name	e and Address)						
Alabama Pow	• •							
Attn: Rod No	wlin							
P O Box 129	26201							
Anniston, AL	30201							
			1					
				THE ABOVE SE	ACE IS F	OR FILING OFFICE U	SE ONLY	
1a. INITIAL FINANCING STATEMENT FILE # 1998-44545 filed 11/10/1998					to	1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS.		
2. X TERMINATION: Eff	ectiveness of the Fin	nancing Statement identified above is	terminated with respec	to security interest(s) of the	Secured P	arty authorizing this Termin	nation Statement.	
3. CONTINUATION: E continued for the additi		Financing Statement identified above d by applicable law.	e with respect to secur	ty interest(s) of the Secure	d Party aut	norizing this Continuation	Statement is	
4. ASSIGNMENT (full o	r partial): Give nam	ne of assignee in item 7a or 7b and a	ddress of assignee in it	m 7c; and also give name	of assignor i	n item 9.		
5. AMENDMENT (PARTY	•		_ _	arty of record. Check only	one of these	two boxes.		
CHANGE name and/or	address: Give curre	¿ provide appropriate information in ite ant record name in item 6a or 6b; also	give new DEL	ETE name: Give record nar	ne 🗖 A	DD name: Complete item	n 7a or 7b, and also	
name (if name change)	in item 7a or 7b and	/or new address (if address change)	in item 7c. to be	deleted in item 6a or 6b.	i	ern 7c; also complete item	ns 7d-7g (if applicat	
6. CURRENT RECORD INI 6a. ORGANIZATION'S N			···········					
OR 66. INDIVIDUAL'S LAST	NAME		FIRST NAME	FIRST NAME		MIDDLE NAME		
Allen			Clarence					
7. CHANGED (NEW) OR A	DDED INFORMATI	iON:	······					
T. ADALUTITATIONS	AME		······································				······································	
7a. ORGANIZATION'S N							SUFFIX	
A D			Terpoz Manas		14455	MIDDLE NAME		
OR 7b. INDIVIDUAL'S LAST	NAME		FIRST NAME		MIDDL			
7b. INDIVIDUAL'S LAST Allen	NAME		Tressie					
7b. INDIVIDUAL'S LAST Allen 7c. MAILING ADDRESS	NAME		CITY		STATE		COUNTRY	
76. INDIVIDUAL'S LAST Allen 7c. MAILING ADDRESS 17720 Hwy 55		TO TYPE OF OPCANIZATION	Tressie CITY Sterrett		STATE	35147	COUNTRY	
76. INDIVIDUAL'S LAST Allen 7c. MAILING ADDRESS 17720 Hwy 55	ADD'L INFO RE ORGANIZATION	7e. TYPE OF ORGANIZATION	CITY	FORGANIZATION	STATE		COUNTRY	
76. INDIVIDUAL'S LAST Allen 7c. MAILING ADDRESS 17720 Hwy 55 7d. TAX ID #: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR		Tressie CITY Sterrett	FORGANIZATION	STATE	35147	COUNTRY	
7b. INDIVIDUAL'S LAST Allen 7c. MAILING ADDRESS 17720 Hwy 55 7d. TAX ID #: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR TERAL CHANGE	=): check only <u>one</u> box.	Tressie CITY Sterrett 7f. JURISDICTION O		STATE AL 7g. OR	35147	COUNTRY USA	
7b. INDIVIDUAL'S LAST Allen 7c. MAILING ADDRESS 17720 Hwy 55 7d. TAX ID #: SSN OR EIN 8. AMENDMENT (COLLA Describe collateral del	ADD'L INFO RE ORGANIZATION DEBTOR TERAL CHANGE eted or added.		Tressie CITY Sterrett 7f. JURISDICTION O		STATE AL 7g. OR	35147	COUNTRY USA	
7b. INDIVIDUAL'S LAST Allen 7c. MAILING ADDRESS 17720 Hwy 55 7d. TAX ID #: SSN OR EIN B. AMENDMENT (COLLA Describe collateral del (1) Armstrong Hea	ADD'L INFO RE ORGANIZATION DEBTOR TERAL CHANGE added, tpump	E): check only <u>one</u> box. or give entire restated collatera	Tressie CITY Sterrett 7f. JURISDICTION O		STATE AL 7g. OR	35147	COUNTRY USA	
7b. INDIVIDUAL'S LAST Allen 7c. MAILING ADDRESS 17720 Hwy 55 7d. TAX ID #: SSN OR EIN 8. AMENDMENT (COLLA Describe collateral del (1) Armstrong Hea model # SHP10C2	ADD'L INFO RE ORGANIZATION DEBTOR TERAL CHANGE added, tpump 4A-3 serial #	E): check only <u>one</u> box. or give entire restated collatera	Tressie CITY Sterrett 7f. JURISDICTION O		STATE AL 7g. OR	35147	COUNTRY USA	
7b. INDIVIDUAL'S LAST Allen 7c. MAILING ADDRESS 17720 Hwy 55 7d. TAX ID #: SSN OR EIN B. AMENDMENT (COLLA Describe collateral del (1) Armstrong Hea	ADD'L INFO RE ORGANIZATION DEBTOR TERAL CHANGE added, tpump 4A-3 serial #	E): check only <u>one</u> box. or give entire restated collatera	Tressie CITY Sterrett 7f. JURISDICTION O		STATE AL 7g. OR	35147	COUNTRY USA	
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Allen 7c. MAILING ADDRESS 17720 Hwy 55 7d. TAX ID #: SSN OR EIN B. AMENDMENT (COLLAD Describe collateral del del del model # SHP10C2 model # BCZ24B0	ADD'L INFO RE ORGANIZATION DEBTOR TERAL CHANGE added, added, the serial #8 8 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	E): check only <u>one</u> box. or give entire restated collateral # 58498F47025 1 # 56098G10754	Tressie CITY Sterrett 7f. JURISDICTION Of the description, or description of the descript	be collateral assigned	STATE AL.	35147 GANIZATIONAL ID #, if ar	COUNTRY USA	
Allen 7c. MAILING ADDRESS 17720 Hwy 55 7d. TAX ID #: SSN OR EIN 3. AMENDMENT (COLLA Describe collateral del (1) Armstrong Hea model # SHP10C2 model # BCZ24B0 3. NAME OF SECURED	ADD'L INFO RE ORGANIZATION DEBTOR TERAL CHANGE eted or added. tpump 4A-3 serial # 8N00A seria	E): check only <u>one</u> box. or give entire restated collatera	Tressie CITY Sterrett 7f. JURISDICTION Of the description, or description description of the state of the sta	be collateral assigned	STATE AL 7g. OR	35147 GANIZATIONAL ID #, if are an Amendment authorized in the second s	COUNTRY USA	
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UC	C FINANCING STATE	MENTAMENDME	ENTADDENDUM
FOL	LOW INSTRUCTIONS (front and ba	ck) CAREFULLY	
11.	INITIAL FINANCING STATEMENT	FILE # (same as item 1a on Amei	ndment form)
	1998-44545 filed 11	/10/1998	
12.	NAME OF PARTY AUTHORIZING	THIS AMENDMENT (same as i	item 9 on Amendment form)
	12a. ORGANIZATION'S NAME		
OR	12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME,SUFFIX
	Willis	Royce	

13. Use this space for additional information

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY