20040607000305800 Pg 1/2 29.50 Shelby Cnty Judge of Probate, AL 06/07/2004 15:03:00 FILED/CERTIFIED

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

ALABAMA GAS CORPORATION #20 SOUTH 20TH STREET BIRMINGHAM, AL 35295

	THE ABOVE	SPACE IS FO	R FILING OFFICE USE	ONLY	
1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a d	or 1b) - do not abbreviate or combine names				
1a. ORGANIZATION'S NAME					
OR 1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE:	MIDDLE NAME		
	BEVERLY	SHERRY		SUFFIX	
ATKINSON 1c. MAILING ADDRESS	CITY	STATE	COUNTRY		
2407 TITONKA ROAD	BIRMINGHAM	ΑL	POSTAL CODE 35244	USA	
1d. TAX ID #: SSN OR EIN ADD'L INFO RE 1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION	1g. ORGA			
ORGANIZATION DEBTOR				NONE	
2a. ORGANIZATION'S NAME OR 2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME		SUFFIX	
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY	
2d. TAX ID #: SSN OR EIN ADD'L INFO RE 2e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any		NONE	
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR	S/P) - insert only <u>one</u> secured party name (3a or	3b)			
3a. ORGANIZATION'S NAME ALABAMA GAS CORPORATION					
3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME		SUFFIX	
3c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY	
#20 SOUTH 20TH STREET	BIRMINGHAM	AL 35295		USA	
4. This FINANCING STATEMENT covers the following collateral:					

3 Ton Cond Un. 17 # CPLE 36-1A S#0404780367

#975.00

5. ALTERNATIVE DESIGNATION [if applicable]: LESSEE/LESSOR	CONSIGNEE/C	CONSIGNOR	BAILEE/BAILOR	SELLER/BUYER	AG. LIEN	NON-UCC FILING
6. This FINANCING STATEMENT is to be filed [for record] (or recorded) ESTATE RECORDS. Attach Addendum	in the REAL 7	Check to REQUIADDITIONAL F	JEST SEARCH REPO	RT(S) on Debtor(s) [optional]	All Debtors	Debtor 1 Debtor 2
8. OPTIONAL FILER REFERENCE DATA			<u>-</u>			

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JCC FINANCING STATE OLLOW INSTRUCTIONS (front and ba		A			
3. NAME OF FIRST DEBTOR (1a or 1		TATEMENT			
9a. ORGANIZATION'S NAME					
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX			
ATKINSON	BEVERLY	SHERRY			
0. MISCELLANEOUS:					
		THE AE	SOVE SPACE IS	FOR FILING OFFI	CE USE ONLY
	FULL LEGAL NAME - insert only on	e name (11a or 11b) - do not abbreviate or combine	a names		
11a. ORGANIZATION'S NAME					
11b. INDIVIDUAL'S LAST NAME	<u> </u>	FIRST NAME	MIDDLE NA	AME	SUFFIX
Ic. MAILING ADDRESS	<u></u>	CITY	STATE	POSTAL CODE	COUNTRY
d. TAX ID #: SSN OR EIN ADD'L INFO ORGANIZAT	I I	11f. JURISDICTION OF ORGANIZATION	11g. ORGA	NIZATIONAL ID #, if a	ny NON
ADDITIONAL SECURED PAR	RTY'S or ASSIGNOR S/P	'S NAME - insert only <u>one</u> name (12a or 12b)			
12a. ORGANIZATION'S NAME PROTECT MECH	ANTCAL HEATING	3 & AIR CONDITIONING	C; II		
R 12b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NA	AME	SUFFIX
c. MAILING ADDRESS	<u></u>	CITY	STATE	POSTAL CODE	COUNTRY
22705 HWY 5		WEST BLOCTON	AL	35184	USA
collateral, or is filed as a fixture filing. Description of real estate:		d 16. Additional collateral description:			
PROBATE OFFICE: SUB DIVISION 5T LOT #9 MAP BOOK	INDIAN VALLEY H SECTION				
. Name and address of a RECORD OWNE (if Debtor does not have a record interest)					
		17. Check only if applicable and check only o	ne box.	,	· · · · · · · · · · · · · · · · · · ·
		Debtor is a Trust or Trustee acting v		perty held in trust or	Decedent's Estat
		18. Check <u>only</u> if applicable and check <u>only</u> or	ne box.		
		Debtor is a TRANSMITTING UTILITY	•	FF	
		Filed in connection with a Manufactured-F	nome Transaction -	 effective 30 years 	

Filed in connection with a Public-Finance Transaction — effective 30 years