5/-V 2-8	lby.	20040715000390170 Pg 1 Shelby Cnty Judge of Pi 07/15/2004 09:24:00 FI	
UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional]	150 X James Luston	B. Signat	ure
B. SEND ACKNOWLEDGMENT TO: (Name and Address) Alabama Gas Corpora 20 South 20th Street Birmingham Al 3529	2+		
DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1a. ORGANIZATION'S NAME		ACE IS FOR FILING OFFICE USE	ONLY
OR 16. INDIVIDUAL'S LAST NAME 1c. MAILING ADDRESS 107 Stone Road	FIRSTNAME James CITY Petham	MIDDLE NAME B STATE POSTAL CODE AL 35124	SUFFIX
1d. TAX ID #: SSN OR EIN ADD'L INFO RE 1e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR 2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one details.	1f. JURISDICTION OF ORGANIZATION btor name (2a or 2b) - do not abbreviate or combine i	1g. ORGANIZATIONAL ID #, if any	NONE
2a. ORGANIZATION'S NAME			CUECIV
2b. INDIVIDUAL'S LAST NAME 2c. MAILING ADDRESS	FIRST NAME CITY	MIDDLE NAME 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 STATE OF ASSIGNOR STA	<i>f</i> •	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS - 20 South 20th St.	Birminaham	STATE POSTAL CODE A1 3595	COUNTRY
4. This FINANCING STATEMENT covers the following collateral: 1-Rund 3 Ton 10 SE Modul: UAKB-036J. Serial: 6952 m 26041 \$1800.00	AZ 15967	g Unit	
5. ALTERNATIVE DESIGNATION [if applicable]: LESSEE/LESSOR CONSIGNATION [if applicable]: LESSEE/LESSOR CONSIGNA		SELLER/BUYER AG. LIEN) on Debtor(s) onall All Debtors D	NON-UCC FILING ebtor 1 Debtor 2

20040715000390170 Pg 2/2 29.50 Shelby Cnty Judge of Probate,AL 07/15/2004 09:24:00 FILED/CERTIFIED

			X	me), <u> </u>	
UCC FINANCING STATE	MENT ADDENDUM		, , , , , , , , , , , , , , , , , , ,		Signo	ture
FOLLOW INSTRUCTIONS (front and ba	ck) CAREFULLY	<u> </u>	COLOTO	YYULF	حرا الم	
9. NAME OF FIRST DEBTOR (1a or 1	b) ON RELATED FINANCING STA	TEMENT				
9a. ORGANIZATION'S NAME						
OR 9b_INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX				
SULINDIVIDOAL S LAST NAIVIE		P				
Diamor	James					
10. MISCELLANEOUS:		•				
			THE ABOVE SP	PACE IS FOR F	ILING OFFICE	USE ONLY
11. ADDITIONAL DEBTOR'S EXACT F	FULL LEGAL NAME - insert only one r	name (11a or 11b) - do not abbre	viate or combine names			
11a. ORGANIZATION'S NAME			<u> </u>			
OR				····		
11b. INDIVIDUAL'S LAST NAME		FIRST NAME	MI	DDLE NAME		SUFFIX
11c. MAILING ADDRESS		CITY	ST	FATE POSTAL	CODE	COUNTRY
						
11d. TAX ID #: SSN OR EIN ADD'L INFO F		11f. JURISDICTION OF ORGA	ANIZATION 111	g. ORGANIZATIO	DNAL ID #, if any	
DEBTOR					<u>-</u>	NONE
12. ADDITIONAL SECURED PAR 12a, ORGANIZATION'S NAME	TY'S or X ASSIGNOR S/P'S	NAME - insert only <u>one</u> name	e (12a or 12b)		<u></u>	
Diabonio 1	1 in a & H	ec. tinca				
OR 12b. INDIVIDUAL'S LAST NAME		FIRST NAME	MI	DDLE NAME	· , ,	SUFFIX
)					
12c. MAILING ADDRESS		CITY	S1	TATE POSTAL	CODE	COUNTRY
3883(Srillitt	-Bend Ka.	Tallade	ga 1	11 3:	5160	USA
13. This FINANCING STATEMENT covers	timber to be cut or as-extracted	16. Additional collateral descri	ription:			······································
collateral, or is filed as a fixture filing].					
14. Description of real estate?						
Lot 25 B1	レス					
LOTAS						
C 1						
Stonehaven	Jubalvisa					
	_					
Map Book 2	-1 rage as					
	, (J					
Shelhy Co	7,04,					
Siteing	With M					
15. Name and address of a RECORD OWNER (if Debtor does not have a record interest):						
,						
		47		······································		,
		17. Check <u>only</u> if applicable a	•			
			Debtor is a Trust or Trustee acting with respect to property held in trust or Decedent's Estate			
		18. Check only if applicable and check only one box.				
		Debtor is a TRANSMITTIN		eaction off4	.a. 20	
		Filed in connection with a				
		The direction with a	T GDIOTEINANCE ITANSACIO	ALL CHECKIVE 30	years	