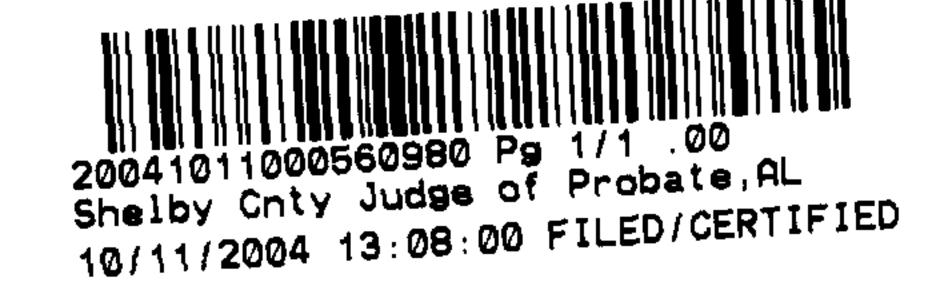
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CC FINANCING STATEMENT AMEI			
	NDMENT		
LLOW INSTRUCTIONS (front and back) CAREFULLY			
NAME & PHONE OF CONTACT AT FILER [optional] Christy Taylor			
SEND ACKNOWLEDGMENT TO: (Name and Address)			
SEIND ACKNOWLEDGINEINT TO. (Name and Address)			
Frontier Bank			
PO Box 630			
Sylacauga, AL 35150			
	3		
	THE A	BOVE SPACE IS FOR FILING OFFICE USE	
INITIAL FINANCING STATEMENT FILE # 199628292 Shelby County JOP		1b. This FINANCING STATEMENT At to be filed [for record] (or record)	
	de tifical above is to mai ated with respect to appurity inters	REAL ESTATE RECORDS.	Statement
✓ TERMINATION: Effectiveness of the Financing Statement id		·	
CONTINUATION: Effectiveness of the Financing Statemer continued for the additional period provided by applicable law.		ne Secured Party authorizing this Continuation Stat	ement is
ASSIGNMENT (full or partial): Give name of assignee in iter	m 7a or 7b and address of assignee in item 7c; and also g	ive name of assignor in ítem 9.	
AMENDMENT (PARTY INFORMATION): This Amendment	t affects Debtor or Secured Party of record. C	neck only <u>one</u> of these two boxes.	
Also check one of the following three boxes and provide appropriate	e information in items 6 and/or 7.		
CHANGE name and/or address: Give current record name in ite name (if name change) in item 7a or 7b and/or new address (if a	tem 6a or 6b; also give new address change) in item 7c. DELETE name: Give		or 7b, and also -7g (if applica
CURRENT RECORD INFORMATION:			
6a. ORGANIZATION'S NAME			
Ch. INIONADULALIC LACTAIANIC			<del>,</del>
I GD. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
Wallis	Roger		
CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME			
7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
I ( ), INDITIONE O LACTIVAME			
	Danel		
Wallis	Danel	STATE POSTAL CODE	COUNTRY
Wallis	Danel	STATE POSTAL CODE	COUNTRY
Wallis	CITY		COUNTRY
Wallis  MAILING ADDRESS  ADD'L INFO RE 79. TYPE OF ORGANIZATION	CITY		
Wallis  MAILING ADDRESS  ADD'L INFO RE 7e. TYPE OF ORGANIZATION DEBTOR  AMENDMENT (COLLATERAL CHANGE): check only one to	CITY  SANIZATION 7f. JURISDICTION OF ORGANIZATION box.	N 7g. ORGANIZATIONAL ID #, if any	
Wallis  MAILING ADDRESS  ADD'L INFO RE 7e. TYPE OF ORGANIZATION DEBTOR  AMENDMENT (COLLATERAL CHANGE): check only one to	CITY  SANIZATION 7f. JURISDICTION OF ORGANIZATION box.	N 7g. ORGANIZATIONAL ID #, if any	
Wallis  MAILING ADDRESS  ADD'L INFO RE 70. TYPE OF ORG. ORGANIZATION DEBTOR	CITY  DANIZATION  7f. JURISDICTION OF ORGANIZATION  box.  restated collateral description, or describe collateral  CING THIS AMENDMENT (name of assignor, if this is a	n Assignment). If this is an Amendment authorized by	
MAILING ADDRESS  ADD'L INFO RE ORGANIZATION DEBTOR  AMENDMENT (COLLATERAL CHANGE): check only one to be collateral or deleted or added, or give entire or adds collateral or adds the authorizing Debtor, or if this is a Terminal Pa. ORGANIZATION'S NAME  Frontier Bank	ANIZATION 7f. JURISDICTION OF ORGANIZATION box. restated collateral description, or describe collateral  EING THIS AMENDMENT (name of assignor, if this is a lation authorized by a Debtor, check here and enter name of an enter name of a	n Assignment). If this is an Amendment authorized by time of DEBTOR authorizing this Amendment.	a Debtor wh
MAILING ADDRESS  ADD'L INFO RE OF TYPE OF ORGANIZATION DEBTOR  AMENDMENT (COLLATERAL CHANGE): check only one to the collateral of deleted or added, or give entire of the collateral of deleted or added, or give entire of the collateral of adds the authorizing Debtor, or if this is a Terminal of the collateral or adds the authorizing Debtor, or if this is a Terminal of the collateral or adds the authorizing Debtor, or if this is a Terminal of the collateral or adds the authorizing Debtor.	ANIZATION 7f. JURISDICTION OF ORGANIZATION box. restated collateral description, or describe collateral  EING THIS AMENDMENT (name of assignor, if this is a lation authorized by a Debtor, check here and enter name of an enter name of a	n Assignment). If this is an Amendment authorized by time of DEBTOR authorizing this Amendment.	a Debtor wh

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