UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] Tommy Oswalt 205-444-0704 B. SEND ACKNOWLEDGMENT TO: (Name and Address) Alabama Cas Corporation		20041104000608470 Pg 1/2 32.50 Shelby Cnty Judge of Probate, AL 11/04/2004 12:23:00 FILED/CERTIFIED		
Alabama Gas Corporation #20 South 20th Street Birmingham, AL 35295 1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a 1a. ORGANIZATION'S NAME		SPACE IS FOR FILING OFFICE US	EONLY	
OR 1b. INDIVIDUAL'S LAST NAME Todd 1c. MAILING ADDRESS	FIRST NAME	MIDDLE NAME STATE POSTAL CODE	SUFFIX	
5048 Aberdeen Way 1d. TAX ID #: SSN OR EIN ADD'L INFORE 1e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR	11. JURISDICTION OF BRUANIZATION	1g. ARGANIZA PIÓNAL 4D4, if any	USA USA NONE	
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one of the control of				
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 3a. ORGANIZATION'S NAME Alabama Gas Corporation 3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
3c. MAILING ADDRESS #20 South 20th Street 4. This FINANCING STATEMENT covers the following collateral:	Birmingham -	STATE POSTAL CODE AL 35295	COUNTRY	

12kw Briggs Generator

M/N: 01815

S/N: 1010655502

#300.00

ALTERNATIVE DESIGNATION	[if applicable]:	LESSEE/LESS	OR CONSIG	NEE/CONSIGNOR	BAILEE/BAIL	OR SELLE	R/BUYER	AG. LIEN	NON-UCC FILI
This FINANCING STATEME ESTATE RECORDS. Att					EQUEST SEARCH F		ebtor(s)	All Debtors	Debtor 1 Debto

20041104000608470 Pg 2/2 32.50 Shelby Cnty Judge of Probate, AL 11/04/2004 12:23:00 FILED/CERTIFIED

FOLLOW INSTRUCTIONS (front and b 9. NAME OF FIRST DEBTOR (1a or				
9a. ORGANIZATION'S NAME				
OR 9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX		
Todd	Warren			
10. MISCELLANEOUS:	Warren			
				AFFIAE HOF AND M
11. ADDITIONAL DEBTOR'S EXACT 11a. ORGANIZATION'S NAME	FULL LEGAL NAME - insert only <u>one</u> r		ABOVE SPACE IS FOR FILING One names	OFFICE USE ONLY
OR 11b. INDIVIDUAL'S LAST NAME		FIRST NAME	RAIDOLE NAME	CUEEN
TID. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
11c. MAILING ADDRESS		CITY	STATE POSTAL CODE	COUNTRY
11d. TAX ID #: SSN OR EIN ADD'L INFO ORGANIZAT DEBTOR	1	11f. JURISDICTION OF ORGANIZATION	11g. ORGANIZATIONAL ID	#, if any
12. ADDITIONAL SECURED PAR 12a. ORGANIZATION'S NAME	RTY'S or ASSIGNOR S/P'S	NAME - insert only <u>one</u> name (12a or 12b))	
OR Capital Hea	ting & Cooling	FIRST NAME	MIDDLE NAME	SUFFIX
12c. MAILING ADDRESS		CITY	STATE POSTAL CODE	COUNTRY
524_A Miner	al Trace	HOOVOR	ΔΙ 3524A	1571 HCA
13. This FINANCING STATEMENT covers collateral, or is filed as a fixture filing of the collateral f		16. Additional collateral description:		
15. Name and address of a RECORD OWNE (if Debtor does not have a record interest		17. Check only if applicable and check only Debtor is a Trust or Trustee action 18. Check only if applicable and check only Debtor is a TRANSMITTING UTILITY Filed in connection with a Manufacture Filed in connection with a Public-Finan	ng with respect to property held in trust y one box. d-Home Transaction — effective 30 year	