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JCC FINANCING STATEMENT AMENDME OLLOW INSTRUCTIONS (front and back) CAREFULLY				
A. NAME & PHONE OF CONTACT AT FILER [optional]				
Richard C. Fruechtenicht - (205) 268-3610				
SEND ACKNOWLEDGMENT TO: (Name and Address)				
Protective Life Insurance Company				
P. O. Box 2606				
Birmingham, Alabama 35202				
ATTN: Investment Department				
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. INITIAL FINANCING STATEMENT FILE #	THE ABO		OR FILING OFFICE US	
2001-01352 - filed 1/12/2001 - Shelby County, AL		to	is FINANCING STATEMED be filed [for record] (or rec	
	we is torminated with respect to an excited interest	RE	AL ESTATE RECORDS.	
TERMINATION: Effectiveness of the Financing Statement identified about CONTINUATION: Effectiveness of the Financing Statement identified about 100 No.				
CONTINUATION: Effectiveness of the Financing Statement identified continued for the additional period provided by applicable law.	above with respect to security interest(s) of the	Secured Party auth	horizing this Continuation :	Statement is
ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b a	and address of assignee in item 7c; and also give	nome of occiones in	a itama O	
Also check one of the following three boxes and provide appropriate information	Debtor <u>or</u> Secured Party of record. Chec	ck only <u>one</u> of these	two boxes.	
CHANGE name and/or address: Give current record name in item 6a or 6b; name (if name change) in item 7a or 7b and/or new address (if address cha		cord name	DD name: Complete item	7a or 7b. and also
CURRENT RECORD INFORMATION:	nge) in item 7c to be deleted in item 6a d	or 6bite	em 7c; also complete items	7d-7g (if applicab
6a. ORGANIZATION'S NAME	······································		······································	
Morning Sun Villas, L.L.C., an Alabama limited li	iability company			
6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
CHANGED (NEW) OR ADDED INFORMATION:	· · · · · · · · · · · · · · · · · · ·			<u> </u>
7a. ORGANIZATION'S NAME				·
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	FIRST NAME	MIDDLE	NAME	SUFFIX
2	FIRST NAME	MIDDLE	NAME	SUFFIX
7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME POSTAL CODE	SUFFIX
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7b. INDIVIDUAL'S LAST NAME MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
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