



		01/06/2005 12:20:0	0 FILED/CERTIF
UCC FINANCING STATEMENT AMENDME FOLLOW INSTRUCTIONS (front and back) CAREFULLY	:NT		
A. NAME & PHONE OF CONTACT AT FILER [optional]			
Richard C. Fruechtenicht - (205) 268-3610			
B. SEND ACKNOWLEDGMENT TO: (Name and Address)			
Protective Life Insurance Company			
P. O. Box 2606			
Birmingham, Alabama 35202			
ATTN: Investment Department			
1a. INITIAL FINANCING STATEMENT FILE #	THE ABOVE	1b. This FINANCING STATEM	
2001-01352 - filed 1/12/2001 - Shelby County, AL		to be filed [for record] (or re	ecorded) in the
2. TERMINATION: Effectiveness of the Financing Statement identified above	e is terminated with respect to security interest(s) of t	REAL ESTATE RECORDS he Secured Party authorizing this Term	ination Statement.
3. CONTINUATION: Effectiveness of the Financing Statement identified a	above with respect to security interest(s) of the Secu	red Party authorizing this Continuation	n Statement is
and the dedication period provided by applicable law.			
ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b ar	وبرجين والمستقل والمس		
AMENDMENT (PARTY INFORMATION): This Amendment affects Also check one of the following three boxes and provide appropriate information		y <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 change)		ame ADD name: Complete iten	n 7a or 7b, and also
CURRENT RECORD INFORMATION:	ge) in item 7cto be deleted in item 6a or 6b.	item 7c; also complete iten	ns 7d-7g (if applicable).
6a. ORGANIZATION'S NAME	· · · · · · · · · · · · · · · · · · ·	· ··-·	<u></u>
Morning Sun Villas, L.L.C., an Alabama limited ling of the INDIVIDUAL'S LAST NAME	ability company		
OD. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
CHANCED (NEW) OR ADDED INCORNATION			
. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME	·	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
J. TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATION	76 UIDICDICTION OF OBOANUS TON		
ORGANIZATION DEBTOR	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if ar	ny
. AMENDMENT (COLLATERAL CHANGE): check only one box.		· · · · · · · · · · · · · · · · · · ·	NONE
Describe collateral deleted or added, or give entire restated collateral	eral description, or describe collateral Tassigner	d	
	Tassigne	u.	
THIS IS A PARTIAL RELEASE OF COLLATERAL.			
Init 1504 in Horizon, a Condominium, ac actablished b		• • • • ·	
Jnit 1504, in Horizon, a Condominium, as established by which is recorded in Instrument 2001-40927, to which I	by that certain Declaration of Condor	minium of Horizon, a Con-	dominium,
Plan being filed for record in Map Book 28, Page 141 in	the Probate Office of Shelby Count	v. Alabama, and to which	tnereto, said
declaration of Condominium the By-Laws of The Horiz	on Condominium Association is atta	ached as Exhibit "D" toget	her with an
individed interest in the Common Elements assigned to	said units, as shown in Exhibit "C"	of said Declaration of Con	dominium of
Horizon, a Condominium.			
NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AN	MENDMENT (name of assignor, if this is an Assignn	nent). If this is an Amendment authorize	ed by a Debtor which
adds collateral or adds the authorizing Debtor, or if this is a Termination authorize 9a. ORGANIZATION'S NAME	d by a Debtor, check here and enter name of DE	BTOR authorizing this Amendment.	
Protective Life Insurance Company			
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
			SUFFIX
OPTIONAL FILER REFERENCE DATA	<u></u>		1
Horizon Condos - to be filed in Shelby County, Alabama			