



FOLLOW INSTRUCTION	S (front and back	<u></u>					
A. NAME & PHONE OF C							
Marilyn McC B. SEND ACKNOWLEDG	MENT TO: (Nar	ne and Address)					
First C	ommercial	Rank					
800 Sha	des Creek ham, Al.						
			THE ABOVE	SPACE IS	S FOR FILING OFFICE U	SE ONLY	
1a. INITIAL FINANCING STAT	EMENT FILE #			1b.		NT AMENDMENT is	
2002-03468 2 TERMINATION: 5#		County		44 - 63 - 11-1	REAL ESTATE RECORDS.		
	ffectiveness of the	Financing Statement identified abo	is terminated with respect to security interest(s) of overwith respect to security interest(s) of the Security int	الوراور الوراور الوراو	الرساكار ماكاسناك بمكارسك سيء المكالين الكالمكال أكال		
4. ASSIGNMENT (full o	r partial): Give nar	ne of assignee in item 7a or 7b and	address of assignee in item 7c; and also give nam	ne of assign	or in item 9.		
			ebtor or Secured Party of record. Check or	nly <u>one</u> of th	ese two boxes.		
	address: Please re	d provide appropriate information in fer to the detailed instructions of a party.	items 6 and/or 7.  DELETE name: Give record name to be deleted in item 6a or 6b.		ADD name: Complete item 7a tem 7¢: also complete items 7	or 7b, and also e-7g (if applicable).	
6. CURRENT RECORD INF	<del></del>	<del></del>		<del></del>		<del></del>	
OR 6b. INDIVIDUAL'S LAST	Mill, LLI NAME	FIRST NAME	MID	MIDDLE NAME SUFFIX			
7. CHANGED (NEW) OR AI		iont.					
7a. ORGANIZATION'S N	_ <del></del>	ION.	<del></del>	<del></del>	<del></del>	<del></del>	
OR							
76. INDIVIDUAL'S LAST	7b. INDIVIDUAL'S LAST NAME		FIRST NAME	MID	DLE NAME	SUFFIX	
7c. MAILING ADDRESS	<u> </u>	CITY	STA	TE POSTAL CODE	COUNTRY		
7d. SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION	76. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if any			
8. AMENDMENT (COLLA	DEBTOR	<u> </u>			NONE		
Partial Rel	ease:	or give entire restated collate	of Lots 117 through 121 in Map Book 33, Page 38	l Phas	e Five Caldwe the Probate O	ll ffice	
of Shelby (	PARTY OF RECO	labama. Mineral	and Mining rights exce  NDMENT (name of assignor, if this is an Assign by a Debtor, check here and enter name of Debtor.)	epted.	nis is an Amendment authorize		
9a. ORGANIZATION'S NA	ME						
OR First Comme	First Commercial Bank 9b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDI	DLE NAME	SUFFIX	
10. OPTIONAL FILER REFERE	NCE DATA						