



20050126000040540 Pg 1/1 .00 Shelby Cnty Judge of Probate, AL 01/26/2005 13:58:00 FILED/CERTIFIED

## UCC FINANCING STATEMENT AMENDMENT

B. SEND ACKNOWLEDGMENT TO: (Name and Address)  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  16. INITIAL FINANCING STATEMENT FILE B  17. THE FINANCING STATEMENT ADMEDIATED  18. THE FINANCING STATEMENT ADMEDIATED  19. THE FINANCING STATEMENT ADMEDIATED  10. THE FINANCING STATEMENT ADME	OLLOW INSTRUCTIONS (front and back) CAREFULLY  A. NAME & PHONE OF CONTACT AT FILER [optional]				
THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  10. INTO A FRANCING STATEMENT FLOW.  10. THE FRANCING STATEMENT ASSESSMENT					
THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  7a INTITUDE PRINCIPAL STATEMENT PLES  7b The Flank-CORD STATEMENT PLES  7c THE Flank-CORD STATE	3. SEND ACKNOWLEDGMENT TO: (Name and Address)	·			
In Internations State Bernard Advanced   The Internations Statement Advanced   The Internations Statement   The Internations of the Financing Statement dendrified above is terminated with respect to security interests) of the Secure Perry authorizing the Termination Statement   The Internations of the Internation Statement   The Internations of the Internation Statement   The Internation of the Secure Perry authorizing the Termination Statement   The Internation of the Secure Perry authorizing the Internation Statement   The I	Alagasco				
19. In The FINANCING STATEMENT AMENDMENT   THE FINANCING STATEMENT			THE ABOVE S	DACE IS EOD EILING OFFI	'E LIGE ONI V
2. TERMINATION: Electroness of the Francing Statement confried above is terminated with respect to security interneticy of the Secured Party authoriting this Centinuation Statement and Centinual for the additional period provided by applicable two.  4. ASSIGNMENT (fibit or partial): Given name of assignment in terminated below with respect to security interneticy of the Secured Party authoriting this Centinuation Statement is continued for the additional period provided by applicable two.  5. AMENDMENT (FARTY INFORMATION): This Amendment affects of additional period provided by applicable two.  6. AMENDMENT (FARTY INFORMATION): This Amendment affects of additional period of the October o			INEABOVE	1b. This FINANCING STA	TEMENT AMENDMENT is
A.   ASSIGNMENT (Not or perials): Give name of assignee in item 7a or 7b and address of assignee in item 7c, and also give name of assignor in item 9.	2 TERMINATION: Effectiveness of the Financing Statement identific	ed above is terminated with i	espect to security interest(s) of t	he Secured Party authorizing this	Termination Statement.
S. AMENDMENT (PARTY INFORMATION): This Amendment affects		itified above with respect to	security interest(s) of the Secu	red Party authorizing this Continu	ation Statement is
Also check age of the following three boxes and provide appropriate information in learns 6 and/or 7.  CHANGE area and/or address. Give a undergood mane in term 6 and 6 or 6 shall so give a condition from address of the address of	4. ASSIGNMENT (full or partial): Give name of assignee in item 7a of	or 7b and address of assigne	e in item 7c; and also give name	of assignor in item 9.	
CLANGE name and/or address. Give current records name in from 50 or 5b, also give new rame (in amore change) in firm 70 or 75 and also give new rame (in amore change) in firm 70 or 75 and 300 and 75 be geleted in flam 60 or 5b.    CLANGE NECORD INFORMATION:			red Party of record. Check only	one of these two boxes.	
6. CURRENT RECORD INFORMATION:  50 ORGANIZATIONS NAME  OR  50. INDIVIDUAL'S LAST NAME  7. CHANGED (NEW) OR ADDED INFORMATION:  72. ORGANIZATION'S NAME  OR  75. INDIVIDUAL'S LAST NAME  FIRST NAME  FIRST NAME  FIRST NAME  MIDDLE NAME  SUFFIX  STATE POSTAL CODE  COUNTRY  AND DESTRUCTURED FOR THE TYPE OF ORGANIZATION DESTRUCTURED AND DESTRUCTURED FORGANIZATION DESTRUCTURED FORGANIZATION OF ORGANIZATION OF ORGANIZAT	CHANGE name and/or address: Give current record name in item 6a	or 6b; also give new		ame ADD name: Complet	e item 7a or 7b. and also e items 7d-7g (if applicable)
7. CHANGED (NEW) OR ADDED INFORMATION:  7. ORGANIZATION'S NAME  OR  7. INDIVIDUAL'S LAST NAME  FIRST NAME  FIRST NAME  FIRST NAME  FIRST NAME  FIRST NAME  MIDDLE NAME  SUFFIX  TO INDIVIDUAL'S LAST NAME  STATE  POSTAL CODE  ADJUSTED  COUNTRY  ADJUSTED  TO GRANIZATION  To	6. CURRENT RECORD INFORMATION:		to be defeted in item oa or ob.	TICHT TO, AISO COMPLETE	- Itoms rang (ii applicable)
7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  FIRST NAME  FIRST NAME  FIRST NAME  FIRST NAME  FIRST NAME  SUFFIX  TO MAILING ADDRESS  AUGUSTA  AUGUSTA  FIRST NAME  FIRST NAME  STATE  FOSTAL CODE  COUNTRY  AUGUSTA  AUGUSTA  AUGUSTA  FOSTAL CODE  COUNTRY  AUGUSTA  FIRST NAME  FIRST NAME  STATE  FOSTAL CODE  COUNTRY  AUGUSTA  AUGUSTA  FIRST NAME  FIRST NAME  STATE  FOSTAL CODE  COUNTRY  AUGUSTA  AUGUSTA  FIRST NAME  STATE  FOSTAL CODE  COUNTRY  AUGUSTA  FIRST NAME  FIRST NAME  STATE  FOSTAL CODE  COUNTRY  AUGUSTA  AUGUSTA  FIRST NAME  FIRST NAME  STATE  FOSTAL CODE  COUNTRY  AUGUSTA  AUGUSTA  FIRST NAME  FIRST NAME  STATE  FOSTAL CODE  COUNTRY  AUGUSTA  AUGUSTA  FIRST NAME  FIRST NAME  STATE  FOSTAL CODE  COUNTRY  AUGUSTA  AUGUSTA  FIRST NAME  FIRST NAME  STATE  FOSTAL CODE  COUNTRY  AUGUSTA  AUGUSTA  FIRST NAME  FIRST NAME  STATE  FOSTAL CODE  COUNTRY  AUGUSTA  AUGUSTA  FIRST NAME  FIRST NAME  STATE  FOSTAL CODE  COUNTRY  AUGUSTA  AUGUSTA  FIRST NAME  FIRST NAME  STATE  FOSTAL CODE  COUNTRY  AUGUSTA  AUGUSTA  FIRST NAME  FIRST NAME  STATE  FOSTAL CODE  AUGUSTA  AUGUSTA  FIRST NAME  FIRST NAME  FIRST NAME  FIRST NAME  STATE  FOSTAL CODE  AUGUSTA  AUGUSTA  FIRST NAME  FIRS	OR 6b. INDIVIDUAL'S LAST NAME.	FIRST NAME	chael	MIDDLE NAME	SUFFIX
FIRST NAME  To INDIVIDUAL'S LAST NAME  FIRST NAME  STATE  FOSTAL CODE  COUNTRY  AND 35 US SU  GRGANIZATION To The OFF To The OFF ORGANIZATION  ORGANIZATION TO THE OFF ORGANIZATION  DEBTOR  AMENDMENT (COLLATERAL CHANGE): check only one box.  Describe collateral deleted or added, or give entire restated collateral description, or describe collateral assigned.  9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here and enter name of DEBTOR authorizing this Amendment.  98. ORGANIZATIONS NAME  A A A A A A A A A A A A A A A A A A A					
7c. MAILING ADDRESS  TO SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here and enter name of DEBTOR authorizing this Amendment.	7a. ORGANIZATION'S NAME				
2. TAYLD #: SSN OB FIN. LADO'L INFO RE   7e, TYPE OF ORGANIZATION   7f. JURISDICTION OF ORGANIZATION   7g. ORGANIZATIONAL ID #, if any ORGANIZATION DEBTOR   No.	7b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE NAME	SUFFIX
ORGANIZATION DEBTOR  8. AMENDMENT (COLLATERAL CHANGE): check only one box.  Describe collateral deleted or del	121 Augusta Way			a 41 350	80
8. AMENDMENT (COLLATERAL CHANGE): check only one box.  Describe collateral deleted or added, or give entire restated collateral description, or describe collateral assigned.  9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here and enter name of DEBTOR authorizing this Amendment.  9a. ORGANIZATIONS NAME	ORGANIZATION 1	ATION 7f. JURISDICT	ION OF ORGANIZATION	7g. ORGANIZATIONAL ID	
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OR 9b. INDIVIDUAL'S LAST NAME SUFFIX	adds collateral or adds the authorizing Debtor, or if this is a Termination a	-			
	OR 9b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE NAME	SUFFIX