



A. NAME & PHONE OF CONTACT AT FILER [optional]				
I. RUFFIN/205.226.1902				
. SEND ACKNOWLEDGMENT TO: (Name and Address)				
ALABAMA POWER COMPANY				
600 NORTH 18TH STREET				
BIRMINGHAM, AL 35291				
	THE ABO	المسان المسيران المسيروات	R FILING OFFICE US	
A. INITIAL FINANCING STATEMENT FILE #			1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the	
20040213000075730/SHELBY			REAL ESTATE RECORDS.	
TERMINATION: Effectiveness of the Financing Statement identific	عبر بروان المراجعة عبر المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجع			
CONTINUATION: Effectiveness of the Financing Statement idea continued for the additional period provided by applicable law.	entitied above with respect to security interest(s) of the	Secured Party auth	orizing this Continuation S	tatement is
ASSIGNMENT (full or partial): 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.	
AMENDMENT (PARTY INFORMATION): This Amendment affect			······································	
Also check one of the following three boxes and provide appropriate infor		•		
CHANGE name and/or address: Give current record name in item 6a name (if name change) in item 7a or 7b and/or new address (if address	a or 6b; also give new DELETE name: Give recess change) in item 7c.  to be deleted in item 6a of	ord name AD ite	D name: Complete item 7 m 7c; also complete items	a or 7b, and also 7d-7g (if applicable
CURRENT RECORD INFORMATION:				
6a. ORGANIZATION'S NAME				
R 6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	MIDDLE NAME SUFFIX	
ROLLINS	DENNIS	T	T	
		1		
. CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME	<u> </u>	<u> </u>	<u> </u>	<del></del>
Ta. Ottoritalia				
75. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
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ROLLINS		•	TRACTIL CORE	COLINTER
<u></u>	СПҮ	STATE	POSTAL CODE	COUNTRY
ROLLINS c. MAILING ADDRESS 25 KENTWOOD LN	ALABASTER	STATE	35007	COUNTRY
. MAILING ADDRESS 25 KENTWOOD LN ADD'L INFO RE 76. TYPE OF ORGANIZA	ALABASTER	AL		
MAILING ADDRESS 25 KENTWOOD LN	ALABASTER	AL	35007	
MAILING ADDRESS  25 KENTWOOD LN  ADD'L INFO RE   7e. TYPE OF ORGANIZATION   DEBTOR	ALABASTER	AL	35007	
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MAILING ADDRESS  25 KENTWOOD LN  ADD'L INFO RE   7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR  AMENDMENT (COLLATERAL CHANGE): check only one box.	ALABASTER  7f. JURISDICTION OF ORGANIZATION  ted collateral description, or describe collateral as	AL 7g. ORG	35007 ANIZATIONAL ID #, if any	
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ADD'L INFO RE 76. TYPE OF ORGANIZATION DEBTOR  AMENDMENT (COLLATERAL CHANGE): check only one box.  Describe collateral deleted or added, or give entire restate  NAME OF SECURED PARTY OF RECORD AUTHORIZING adds collateral or adds the authorizing Debtor, or if this is a Termination 9a. ORGANIZATION'S NAME	ALABASTER  7f. JURISDICTION OF ORGANIZATION  ted collateral description, or describe collateral as  THIS AMENDMENT (name of assignor, if this is an A	AL 7g. ORG ssigned.	ANIZATIONAL ID #, if any orizing this Amendment authorized orizing this Amendment.	NO