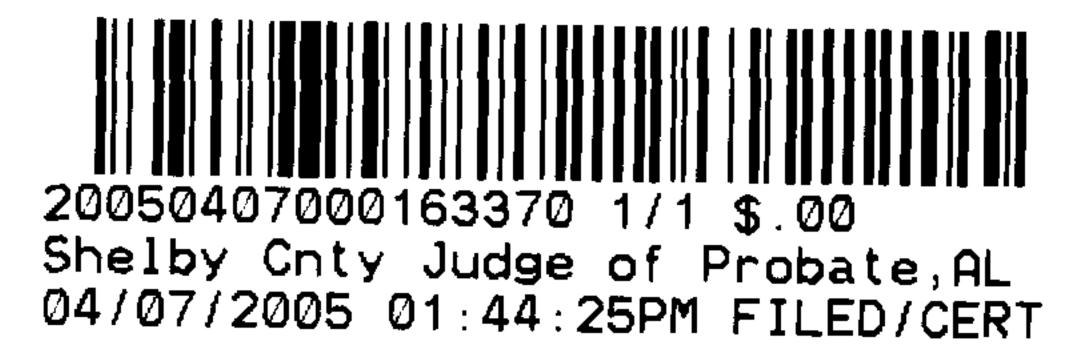
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Shelby Cntv
Shelby Cnty 04/07/2005 0



UCC FINANCING STATEMENT AMENDME	NT			
FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional]				
Marilyn McCue 205-868-4839				
B. SEND ACKNOWLEDGMENT TO: (Name and Address)				
First Commercial Bank				
800 Shades Creek Parkway Birmingham, Al 35209				
DITHITINGHAM, AI 33203				
1a. INITIAL FINANCING STATEMENT FILE #	THE ABOVE SF		R FILING OFFICE US	
		to i	s FINANCING STATEMEN be filed [for record] (or rec	
20030904000589130 JOP She1by 2. XX TERMINATION: Effectiveness of the Financing Statement identified above	e is terminated with respect to security interest(s) of the		AL ESTATE RECORDS. rty authorizing this Termina	ation Statement.
3. CONTINUATION: Effectiveness of the Financing Statement identified all continued for the additional period provided by applicable law.				
4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and	d address of assignee in item 7c; and also give name o	f assignor in	item 9.	
5. AMENDMENT (PARTY INFORMATION): This Amendment affects		one of these	two boxes.	
Also check <u>one</u> of the following three boxes <u>and</u> provide appropriate information in CHANGE name and/or address: Please refer to the detailed instructions	n items 6 and/or 7. DELETE name: Give record name		name: Complete item 7a	or 7h, and also
in regards to changing the name/address of a party. 6. CURRENT RECORD INFORMATION:	to be deleted in item 6a or 6b.		7c: also complete items 7e	Ţ
6a. ORGANIZATION'S NAME				<u> </u>
OR Thompson Contracting and INvestment of the Individual's LAST NAME		Thurse E		1000000
TOD. INDIVIDUALS LAST NAIME	FIRST NAME	MIDDLE	MIDDLE NAME SUFFIX	
7. CHANGED (NEW) OR ADDED INFORMATION:				
7a. ORGANIZATION'S NAME		<u> </u>	——————————————————————————————————————	
OR				
7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
7c. MAILING ADDRESS	CITY	OT 4 T E	IDOCTAL CODE	
70. WINIERO ADDICEOS	CITY	STATE	POSTAL CODE	COUNTRY
7d. SEE INSTRUCTIONS ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR	7f. JURISDICTION OF ORGANIZATION	7g. ORG	ANIZATIONAL ID #, if any	
8. AMENDMENT (COLLATERAL CHANGE): check only one box.				NONE
Describe collateral deleted or added, or give entire restated collate	eral description, or describe collateral assigned.			
To remain of this control of 2002000/000500120				
Termination: 20030904000589130				
O MANAT OF CECLIDED DADTY OF DECODE ALIEROPHING THE			——————————————————————————————————————	
 NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AM adds collateral or adds the authorizing Debtor, or if this is a Termination authorized 	ENDMENT (name of assignor, if this is an Assignme d by a Debtor, check here and enter name of DEE	nt). If this is TOR author	an Amendment authorized izing this Amendment.	by a Debtor which
9a. ORGANIZATION'S NAME First Commercial Bank		<u> </u>		
NAKAKAKAKAKAKAKAKAKAKAKAKAKAKAKAKAKAKAK	6XXXXXXX			
96. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
10 ODTIONAL EILED DEEDENGE DATA				
10.OPTIONAL FILER REFERENCE DATA Thompson Contracting and Investments	Τno			
Timmbon confidence and Threpence	+			