5/28-40 3/40 1114

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UCC FINANCING STATEMENT

A. NAME & PHONE OF CONTACT AT FILER [optional]
Tommy Oswalt 205-444-0704

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

Alabama Gas Corporation
20 South 20th Street
Birmingham, AL 35295

			THE ABOVE S	PACE IS FO	OR FILING OFFICE U	SEONLY
1. DEBTOR'S EXACT FULL LEGAL NAME - insert only	one debtor name (1a	or 1b) - do not abbrev	iate or combine names			
1a. ORGANIZATION'S NAME						
OR 1b. INDIVIDUAL'S LAST NAME		FIRST NAME	FIRST NAME -		MIDDLE NAME	
Holland		Bob	(Robert)		5	
1c. MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
5169 Weatherford Drive		Birmin	gham	AL	35242	USA
1d TAX ID #: SSN OR FIN ADD'L INFO RE 1e. TYPE OF ORGANIZATION DEBTOR	ORGANIZATION	1f. JURISDICTION	OFORGANIZATION	1g. ORG	ANIZATIONAL ID #, if any	NONE
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAM	∕IE - insert only <u>one</u> d	lebtor name (2a or 2b) - do not abbreviate or combin	e names		
2a						
OR 2b. INDIVIDUAL'S LAST NAME		FIRST NAME	<u> </u>	MIDDLE	NAME	SUFFIX
120. HADIVIDOAL S LAST HANIVIL		I II CO I I VAIVIL	FIRSTNAIVE		MIDDLE NAME	
2c. MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
2d. TAX ID #: SSN OR EIN ADD'L INFO RE 2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION		2g. ORG	/ /	
ORGANIZATION DEBTOR						NONE
3. SECURED PARTY'S NAME (or NAME of TOTAL ASS	IGNEE of ASSIGNOR	R S/P) - insert only <u>one</u>	secured party name (3a or 3b)		
3a. ORGANIZATION'S NAME						
OR Alabama Gas Corporation		FIRST NAME		MIDDLE NAME		SUFFIX
3b. INDIVIDUAL'S LAST NAME		FIRSTNAIVE				SUFFIX
3c. MAILING ADDRESS		CITY	· • · · · · · · · · · · · · · · · · · ·	STATE	POSTAL CODE	COUNTRY
20 South 20th Street		Birmino	Birmingham		35295	USA
4. This FINANCING STATEMENT covers the following collateral:				AL		
1 - M/N 2TTR1042A1000A	S/N 50)842UE4F	A/C			
1 - M/N TUD080C948K	S/N 44	125R351G	Furn.			
1 - TXC042C4HPC	S/N 50)93YUM5G	Coil			
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			# 560	J .		
			- , ,			

5. ALTERNATIVE DESIGNATION [if applicable]:	LESSEE/LESSOR	CONSIGNE	E/CONSIGNOR	BAILEE/BAILOR	SELLER/BUYER	AG. LIEN	NON-I	UCC FILING
6. This FINANCING STATEMENT is to be filed ESTATE RECORDS. Attach Addendum	[for record] (or recorded)	in the REAL [if applicable]	7. Check to REQUADDITIONAL	JEST SEARCH REPO	RT(S) on Debtor(s) [optional]	All Debtors	Debtor 1	Debtor 2
8 OPTIONAL FILER REFERENCE DATA								

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JCC FINANCING STATEMEN OLLOW INSTRUCTIONS (front and back) CA	· - · · · · · · · · · · · · · · · · · ·						
NAME OF FIRST DEBTOR (1a or 1b) ON		TEMENT					
9a. ORGANIZATION'S NAME							
R 9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX					
Holland	Bob	MIDDLE NAME, SUFFIX					
0. MISCELLANEOUS:	DOD						
			THE ABOVE	SPACE	S FOR FILING OFFICE	USEONLY	
1. ADDITIONAL DEBTOR'S EXACT FULL LI	EGAL NAME - insert only <u>one</u> n	ame (11a or 11b) - do not abbrevia	<u> </u>				
11a. ORGANIZATION'S NAME							
11b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE NAME		SUFFIX	
1c. MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY	
d. TAX ID #: SSN OR EIN ADD'L INFO RE 116 ORGANIZATION DEBTOR	e. TYPE OF ORGANIZATION	11f. JURISDICTION OF ORGANIZ	ZATION	11g. ORG	ANIZATIONAL ID #, if any	NOI	
2. ADDITIONAL SECURED PARTY'S 12a. ORGANIZATION'S NAME	or ASSIGNOR S/P'S	NAME - insert only one name (1	2a or 12b)				
	0 0 - 1						
R Capital Heating 12b. INDIVIDUAL'S LAST NAME	& Cooling	FIRST NAME		MIDDLE 1	AME	SUFFIX	
c. MAILING ADDRESS		CITY	· · · · · · · · · · · · · · · · · · ·	STATE	POSTAL CODE	COUNTRY	
524-A Mineral Trac	e	Hoover		AL	35244-4571	USA	
S. This FINANCING STATEMENT covers timber collateral, or is filed as a fixture filing. I. Description of real estate: Lot 13 Lincoln Park Subdi Blk 8 Section	vision	16. Additional collateral descripti	ion:				
 Name and address of a RECORD OWNER of abortific (if Debtor does not have a record interest): 	ve-described real estate						