


DLLOW INSTRUCTIONS (front and back) CAREFULLY			
NAME & PHONE OF CONTACT AT FILER [optional]			
anine L. Smith (205) 458-5412 SEND ACKNOWLEDGMENT TO: (Name and Address)			
. SEIND ACINIOVALED CIVILIA I TO. (INGINIC GIIG AGGICOS)			
Janine L. Smith Esq.			
Burr & Forman LLP			
3100 SouthTrust Tower			
420 North 20th Street Birmingham, Alabama 35203			
Diffillingham, Alabama 33203			
	THE ABOVE S	PACE IS FOR FILING OFFICE US	
A. INITIAL FINANCING STATEMENT FILE #		1b. This FINANCING STATEMEN to be filed [for record] (or record) REAL ESTATE RECORDS.	
2000-13917			
TERMINATION: Effectiveness of the Financing Statement identified a			
CONTINUATION: Effectiveness of the Financing Statement identification continued for the additional period provided by applicable law.	ed above with respect to security interest(s) of the Secur	red Party authorizing this Continuation S	itatement 15
ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7	7b and address of assignee in item 7c; and also give name	of assignor in item 9.	
AMENDMENT (PARTY INFORMATION): This Amendment affects			
Also check one of the following three boxes and provide appropriate informa			
CHANGE name and/or address: Give current record name in item 6a or name (if name change) in item 7a or 7b and/or new address (if address	6b; also give new DELETE name: Give record na change) in item 7c. DELETE name: Give record name to be deleted in item 6a or 6b.	ame DADD name: Complete item 7 item 7c; also complete items	a or 7b, and also 7d-7g (if applicable
CURRENT RECORD INFORMATION:			
6a. ORGANIZATION'S NAME			
The Whitt Group of West Virginia, Inc.	· · · · · · · · · · · · · · · · · · ·		
6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
. CHANGED (NEW) OR ADDED INFORMATION:			<u> </u>
7a. ORGANIZATION'S NAME			
7a. ORGANIZATION'S NAME	FIRST NAME	MIDDLE NAME	SUFFIX
7a. ORGANIZATION'S NAME	FIRST NAME	MIDDLE NAME	SUFFIX
7a. ORGANIZATION'S NAME	FIRST NAME CITY	MIDDLE NAME STATE POSTAL CODE	SUFFIX
7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME			
7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME c. MAILING ADDRESS ADD'L INFO RE 7e. TYPE OF ORGANIZATI	CITY		COUNTRY
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