

20050504000212470 1/1 \$28.00
Shelby Cnty Judge of Probate, AL
05/04/2005 08:47:34AM FILED/CERT

UCC FINANCING STATEMENT AIVENDINED FOLLOW INSTRUCTIONS (front and back) CAREFULLY	V [
A. NAME & PHONE OF CONTACT AT FILER [optional]			
Ann Moore			
B. SEND ACKNOWLEDGMENT TO: (Name and Address)			
Compass Bank			
4958 Valleydale Road, Suite 101			
Birmingham, Al. 35242			
	THE ABOVE S	PACE IS FOR FILING OFFIC	E USE ONLY
1a. INITIAL FINANCING STATEMENT FILE#		1b. This FINANCING STAT	
20031205000788520		REAL ESTATE RECOR	
2. TERMINATION: Effectiveness of the Financing Statement identified above	is terminated with respect to security interest(s) of the	ne Secured Party authorizing this Te	ermination Statement.
3. CONTINUATION: Effectiveness of the Financing Statement identified ab continued for the additional period provided by applicable law.	pove with respect to security interest(s) of the Secur	red Party authorizing this Continua	ation Statement is
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	of assignor in item 9.	,
5. AMENDMENT (PARTY INFORMATION): This Amendment affects D	Debtor of Secured Party of record. Check only	one of these two boxes.	
Also check one of the following three boxes and provide appropriate information in			
CHANGE name and/or address: Give current record name in item 6a or 6b; a name (if name change) in item 7a or 7b and/or new address (if address change)		ame ADD name: Complete item 7c; also complete	item 7a or 7b, and also
I name (if name change) in item 7a or 7b and/or new address (if address change). 6. CURRENT RECORD INFORMATION:	ge) in item 7c. to be deleted in item 6a or 6b.	i item 7c; also complete	items 70-7g (ii applicable).
6a. ORGANIZATION'S NAME			·
Investment Associates, LLC			
OR 6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
Z CHANGED (NEW) OR ADDED INFORMATION:			<u> </u>
7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME		* , q = q = = = = = = = = = = = = = = = = 	
OR 7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
7c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
7d. TAX ID #: SSN OR EIN ADD'L INFO RE 17e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #,	if any
ORGANIZATION			
DEBTOR			NON
8. AMENDMENT (COLLATERAL CHANGE): check only one box.			
Describe collateral deleted or added, or give entire restated collate	eral description, or describe collateral [assigne	ed.	
DADTIAI DELEACE			
PARTIAL RELEASE			
Lot 5, according to the Survey of Final Plat of the Mixed	d Hee Subdivision Inverness Highla	nde as recorded in Mar	Rook 34 Page
45, in the Probate Office of Shelby County, Alabama.	1 OSC Subdivision inventess ingina	mus, as recorded in ivia	Dook 34, 1 age
45, in the Frobate Office of Sherby Country, Anabama.			
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AI	MENDMENT (name of assignor, if this is an Assign	ment). If this is an Amendment aut	horized by a Debtor which
adds collateral or adds the authorizing Debtor, or if this is a Termination authorize	ed by a Debtor, check here and enter name of D	EBTOR authorizing this Amendme	ent.
9a. ORGANIZATION'S NAME			
Compass Bank			
OR 9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
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SU. TINDIVIDUAL S LAST INMIVIE	FIRST NAIVIE		
10, OPTIONAL FILER REFERENCE DATA	CONTRACTOR DE CO	000000000000000000000000000000000000000	32002080868686868680800ACPQP80880AA