

## UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] B. SEND ACKNOWLEDGMENT TO: (Name and Address) #20 South 20th Street Birmingham, At 35295

	THE ABOVE SDA	CE IS EOI	R FILING OFFICE USE O	NI V
1 DERTOR'S EYACT FULL LEGAL NAME incort only one debter name (1e.er.		CE IS FUI	TILING OFFICE USE O	
DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1a. ORGANIZATION'S NAME	1b) - do not appreviate or combine names			
OR 1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE N	IAME	SUFFIX
1c. MAILING ADDRESS	CITY O	STATE	POSTAL CODE	COUNTRY
441 Cambrian Ridge Trail	Pe/ham 35/24	AL	35124	
1d. TAX ID #: SSN OR EIN   ADD'L INFO RE   1e. TYPE OF ORGANIZATION   ORGANIZATION   DEBTOR	1f. JURISDICTION OF ORGANIZATION 	1g. ORGA	NIZATIONAL ID #, if any	NONE
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one deb	tor name (2a or 2b) - do not abbreviate or combine na	ames		
2a. ORGANIZATION'S NAME				-
2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME		SUFFIX
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGA	NIZATIONAL ID #, if any	
OFOUR DARTMO				NONE
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR SAME)  3a. ORGANIZATION'S NAME	P) - insert only <u>one</u> secured party name (3a or 3b)			
ALABAMA GAS CORP				
3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME		SUFFIX
3c. MAILING ADDRESS #20 South 20th Street	Birminaham	STATE	POSTAL CODE 353535	COUNTRY
4. This FINANCING STATEMENT covers the following collateral:		•		
model# A	C10B18 -1020112-17			
model# S Serial# S	5650070512			
Amount Fin	anced 1000.			

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5. ALTERNATIVE DESIGNATION [if applicable]:	LESSEE/LESSOR	CONSIGNEE/CONSIGNOR	BAILEE/BAILOR	SELLER/BUYER	AG. LIEN	NON-UCC FILING
This FINANCING STATEMENT is to be filed   ESTATE RECORDS. Attach Addendum	[for record] (or recorded) in	n the REAL 7. Check to REC [if applicable] [ADDITIONAL	UEST SEARCH REPOR	RT(S) on Debtor(s) [optional]	All Debtors	Debtor 1 Debtor 2
TIONAL FILER REFERENCE DATA	- ··· · · · · · · · · · · · · · · · · ·					

UCC FINANCING STATEMENT ADDENDUM				
FOLLOW INSTRUCTIONS (front and back) CAREFULLY  9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STA	TEMENT			
9a. ORGANIZATION'S NAME				
OR				
9b. INDIVIDUAL'S LAST NAME  FIRST NAME  William	MIDDLE NAME, SUFFIX			
10. MISCELLANEOUS:				
	•			
		THE ABOVE SPACE IS FOR FILING O	EEICE IIGE ONI V	
11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one re	name (11a or 11h) - do not abbreviate		FFICE USE UILI	
11a. ORGANIZATION'S NAME	iaine (Tra of Trb) - do not abbleviate	or combine mannes		
FREEdom, HWORRY	FREE COR	<u> </u>		
OR 11b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
11c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY	
3653 MUHHANTEN MAY				
11d. TAX ID #: SSN OR EIN   ADD'L INFO RE   11e. TYPE OF ORGANIZATION / ORGANIZATION	11f. JURISDICTION OF ORGANIZA	TION 11g. ORGANIZATIONAL ID #,	, if any	
DEBTOR DESCRIPTION DESCRIPTION DE COMPANY DE			NONE	
12. ADDITIONAL SECURED PARTY'S or ASSIGNOR S/P'S 12a. ORGANIZATION'S NAME	NAME - insert only <u>one</u> name (12a	or 12b)		
FREEDOM A WORR	1 FRE	$O(R^{3})$		
OR 12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
12c. MAILING ADDRESS	CITY	STATE, POSTAL CODE	COUNTRY	
3053 Mountanview WAY	Besseme	1 11 5502		
13. This FINANCING STATEMENT covers timber to be cut or as-extracted	16. Additional collateral description	•		
collateral, or is filed as a fixture filing.  14. Description of real estate.				
Cambrian Ridge				
Phase 3				
mas Book 21				
Fare 141				
XII WH				
15. Name and address of a RECORD OWNER of above-described real estate				
(if Debtor does not have a record interest):				
	17. Check only if applicable and che			
	Debtor is a Trust or Trustee acting with respect to property held in trust or Decedent's Estate			
	18. Check only if applicable and check only one box.			
	Debtor is a TRANSMITTING UTILITY			
		factured-Home Transaction — effective 30 years	3	
	Filed in connection with a Public	c-Finance Transaction — effective 30 years		