



		007 107Z0	05 03:44:07PM F	ILED/CERT
JCC FINANCING STATEMENT AMENDMI	ENT			
OLLOW INSTRUCTIONS (front and back) CAREFULLY				
A. NAME & PHONE OF CONTACT AT FILER [optional] J. RUFFIN 205-226-1902				
B. SEND ACKNOWLEDGMENT TO: (Name and Address)				
IALABAMA POWER COMPANY 600 NORTH 18TH STREET				
BIRMINGHAM, AL 35291				
Direction, AD JJZJi				
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a. INITIAL FINANCING STATEMENT FILE #	INEABU		OR FILING OFFICE U	
1997-14641 SHELBY		T to	be filed [for record] (or reEAL ESTATE RECORDS.	corded) in the
. J TERMINATION: Effectiveness of the Financing Statement identified ab	ove is terminated with respect to security interest(s			
CONTINUATION: Effectiveness of the Financing Statement identified		 		
continued for the additional period provided by applicable law.				· · · · · · · · · · · · · · · · · · ·
. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b	and address of assignee in item 7c; and also give	name of assignor in	n item 9.	
. AMENDMENT (PARTY INFORMATION): This Amendment affects	Debtor or Secured Party of record. Chec	k only <u>one</u> of these	two boxes.	
Also check one of the following three boxes and provide appropriate information			DD name: Campiala Han	a Za az Zh. azad alaa
CHANGE name and/or address: Give current record name in item 6a or 6l name (if name change) in item 7a or 7b and/or new address (if address ch	e; also give new DELETE name: Give rectange) in item 7c. to be deleted in item 6a contact.	ord name A or 6b. it	DD name: Complete iten em 7c; also complete iten	n 7a or 7b, and also ns 7d-7g (if applicable)
. CURRENT RECORD INFORMATION:		,		
6a. ORGANIZATION'S NAME				
PR 6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	MIDDLE NAME SUFFIX	
MOORE	JAMES	\mathbf{B}		
. CHANGED (NEW) OR ADDED INFORMATION:				
7a. ORGANIZATION'S NAME	<u></u>		······································	· ·= · · · · · · · · · · · · · · · · · ·
7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
MOORE	BERTHA	BLA	NKENSHIP	
c. MAILING ADDRESS	CITY	STATE		COUNTRY
2061 ROCK SCHOOL RD	HARPERSVILLE	AL	35078	
ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. OR	SANIZATIONAL ID #, if a	ny
DEBTOR				NON
3. AMENDMENT (COLLATERAL CHANGE): check only one box.				
Describe collateral deleted or added, or give entire restated co	lateral description, or describe collateral as	signed.		
. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS adds collateral or adds the authorizing Debtor, or if this is a Termination autho	·	•		ed by a Debtor which
9a. ORGANIZATION'S NAME	aria critaria			
AMSOUTH BANK OF ALABAMA				
PRIVISO DITTIBITION ALL'INTERIOR PROPERTY OF ALL ALL'INTERIOR PROPERTY OF ALL'IN	FIRST NAME	MIDDLE	NAME	SUFFIX
		}		
0. OPTIONAL FILER REFERENCE DATA				
U, VI TIVIAME I ILLIXIMLI LIMIAUL DATA				