

			08/29/2005 08:49:01AM	FILED/CERI
JCC FINANCING	GSTATEMENTAMENDME	NT		
OLLOW INSTRUCTIONS	S (front and back) CAREFULLY			
A. NAME & PHONE OF C Ann Moore	CONTACT AT FILER [optional]			
*****************	MENT TO: (Name and Address)			
	Avicini i C. (italiio alia Aaaross)			
Compass F	3ank			
	eydale Road, Suite 101			
Birmingha	m, Al. 35242			
2				
a. INITIAL FINANCING STAT	TEMENT ON E #	THE ABOVE	E SPACE IS FOR FILING OFFICE U	to the control of the
20041221000695			1b. This FINANCING STATEME to be filed [for record] (or re	corded) in the
2. TERMINATION: Eff	fectiveness of the Financing Statement identified above	e is terminated with respect to security interest(s) of	of the Secured Party authorizing this Termi	-
	Effectiveness of the Financing Statement identified a			
continued for the addit	tional period provided by applicable law.		out of the dution and the continuation	Otatement is
4. ASSIGNMENT (full of	or partial): Give name of assignee in item 7a or 7b ar	nd address of assignee in item 7c; and also give na	ame of assignor in item 9.	
5. AMENDMENT (PARTY	/ INFORMATION): This Amendment affects	Debtor or Secured Party of record. Check of	only <u>one</u> of these two boxes.	
	wing three boxes and provide appropriate information			
	address: Give current record name in item 6a or 6b; in item 7a or 7b and/or new address (if address chan	also give new DELETE name: Give recordinge) in item 7c. to be deleted in item 6a or 6		n 7a or 7b, and also ns 7d-7g (if applicable).
6a. ORGANIZATION'S N				
Investment As				
6b. INDIVIDUAL'S LAST		FIRST NAME	MIDDLE NAME	SUFFIX
. CHANGED (NEW) OR A	DDED INFORMATION:			
7a. ORGANIZATION'S N	AME	**		·
OR				
7b. INDIVIDUAL'S LAST	NAME	FIRST NAME	MIDDLE NAME	SUFFIX
c. MAILING ADDRESS		CITY		
C. WAILING ADDICESS		CITY	STATE POSTAL CODE	COUNTRY
d. TAX ID#: SSN OR EIN	ADD'L INFO RE 7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if ar	
	ORGANIZATION ' DEBTOR			,
. AMENDMENT (COLLA	TERAL CHANGE): check only one box.			NONE
	eted or added, or give entire restated collate	teral description, or describe collateral assig	gned.	
PARTIAL				
Lots 9, 10 and 30, a	according to the Survey of Final Plat	of The Mixed Use Subdivision In	verness Highlands, as record	lad in Man
Book 34, Page 45 A	& B, in the Probate Office of Shell	by County, Alabama.	ivornoss irrginanius, as record	icu iii iviap
NAME OF SECURED	PARTY OF RECORD AUTHORIZING THIS AI	MENDMENT (name of assignor, if this is an Assig	gnment). If this is an Amendment authorize	ed by a Debtor which
adds collateral or adds the a	authorizing Debtor, or if this is a Termination authorize	ed by a Debtor, check here and enter name of	DEBTOR authorizing this Amendment.	
9a. ORGANIZATION'S NA Compass Bank				
R 9b. INDIVIDUAL'S LAST I		FIRST NAME	MAIDDI E NIANAE	
		THE TAXIBLE	MIDDLE NAME	SUFFIX
), OPTIONAL FILER REFERE	NCE DATA			
