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UCC FINANCING STATEMENT AMENDMENT					
FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional]					
Anita Keely					
B. SEND ACKNOWLEDGMENT TO: (Name and Address)					
Bank of Alabama			•		
P. O. Box 59587					
Birmingham, AL 35209					
Diffiningnam, AL 33203					
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	TUE	ABOVE SBACE I	S FOR FILING OFFICE	LISE ONL V	
1a. INITIAL FINANCING STATEMENT FILE #		1b.	This FINANCING STATE		
20030602000338130			to be filed [for record] (o REAL ESTATE RECORD	r recorded) in the DS.	
2. TERMINATION: Effectiveness of the Financing Statement identified above is	terminated with respect to security int				
3. CONTINUATION: Effectiveness of the Financing Statement identified above continued for the additional period provided by applicable law.	with respect to security interest(s)	of the Secured Party	authorizing this Continuat	ion Statement is	
4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and ad					
5. AMENDMENT (PARTY INFORMATION): This Amendment affects Debt	tor <u>or</u> Secured Party of record.	Check only <u>one</u> of	these two boxes.		
Also check one of the following three boxes and provide appropriate information in ite			ADD some Osmoleka	7 7h	
CHANGE name and/or address: Give current record name in item 6a or 6b; also name (if name change) in item 7a or 7b and/or new address (if address change) in the cord name (if name change) in item 7a or 7b and/or new address (if address change) item 7a or 7b and/or new address (if address change) item 7a or 7b	give new DELETE name: G in item 7c. to be deleted in ite		ADD name: Complete item 7c; also complete	item 7a or 7b, and also items 7d-7g (if applicable).	
6. CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME		· 	_ <u></u>		
KenCar Development, Inc.					
OR 66. INDIVIDUAL'S LAST NAME	FIRST NAME	MI	DDLE NAME	SUFFIX	
7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME					
OR 7b. INDIVIDUAL'S LAST NAME	FIRST NAME	M	DDLE NAME	SUFFIX	
7c. MAILING ADDRESS	CITY	S	TATE POSTAL CODE	COUNTRY	
7d. TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION		7g. ORGANIZATIONAL ID #, if any		
ORGANIZATION DEBTOR				NONE	
8. AMENDMENT (COLLATERAL CHANGE): check only one box. Describe collateral deleted or added, or give entire restated collateral	description, or describe collateral	assigned.			
Partial Release:					
Lot 24, according to the Final Plat Carter's	Addition to Scottsd	iale, as red	corded in Map	Book 32.	
Page 130, in the Probate Office of Shelby					
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9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AME	<u> </u>	_			
adds collateral or adds the authorizing Debtor, or if this is a Termination authorized 9a. ORGANIZATION'S NAME	by a Debtor, check here and enti-	er name of DED I O	R authorizing this Amendme	Ent.	
Bank of Alabama					
OR 9b. INDIVIDUAL'S LAST NAME	FIRST NAME	Į N	NDDLE NAME	SUFFIX	
10. OPTIONAL FILER REFERENCE DATA					
Joan #62739 JOP Shelha Co					