UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER (optional) PAT CARVER 205-221-8886 B. SEND ACKNOWLEDGMENT TO: (Name and Address) PINNACLE BANK P.O. BOX 1388 1811 SECOND AVENUE

20050922000494380 1/1 \$.00 Shelby Cnty Judge of Probate, AL 09/22/2005 03:24:39PM FILED/CERT

	JASPER, AL 35502-1388									
					FILING OFFICE USE					
	NITIAL FINANCING STATEMENT FILE #		1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the							
·	20041209000673630 SHELBY CO				REAL ESTATE RECORDS.					
2.	TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement.									
3.	CONTINUATION: Effectiveness of the Financing Statement identified about continued for the additional period provided by applicable law.	ove with respect to security in	terest(s) of the Secured Pa	irty authori	zing this Continuation Si	atement is				
4.	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 item 9.									
5. /	MENDMENT (PARTY INFORMATION): This Amendment affects D	ebtor <u>or</u> Secured Party	of record. Check only <u>one</u>	of these tw	o boxes.					
ļ	Also check one of the following three boxes and provide appropriate information				- • • • • • • • • • • • • • • • • • • •	7				
	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)		name: Give record name eted in item 6a or 6b.		name: Complete item 7 7c; also complete items					
6 . (URRENT RECORD INFORMATION:			<u></u>						
	6a. ORGANIZATION'S NAME									
	HEATHERBROOKE CONSTRUCTION COMPANY, INC.					·				
OH	6b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE	JAME	SUFFIX				
										
7. (CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME		<u></u>	· · · · · · · · · · · · · · · · · · ·		,				
	7a. OHOMBATTOR O RETURE									
OR	7b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE	VAME	SUFFIX				
7.	MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY				
/C.	WIMILING MUDITLOS									
74	TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF O	RGANIZATION	7g. ORG/	ANIZATIONAL ID #, if ar	<u> </u>				
<i>,</i> u,	ORGANIZATION DEBTOR					XNONE				
	AMENDMENT (COLLATERAL CHANGE): check only one box.									
[Describe collateral deleted or added, or give entire restated coll	ateral description, or describe	collateral assigned.							

	NAME OF SECURED PARTY OF RECORD AUTHO						
	9a. ORGANIZATION'S NAME PINNACLE BANK						
OR	9Ь. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX			
10.	OPTIONAL FILER REFERENCE DATA						

25133