



A. NAME & PHONE OF C	ONTACT AT FILE	R [optional]					
B. SEND ACKNOWLEDG	MENT TO: (Nam	ne and Address)					
Emmanuel, Sh	neppard & Co	ndon					
John W. Moni	roe, Jr.						
30 S. Spring S	t.						
Pensacola, FL	32501						
1							
				THE ABOVE SPACE IS FO	R FILING OFFICE U	SEONLY	
1a. ORGANIZATION'S NA		E - insert only <u>one</u> debtor name (1a	or 1b) - do not abbreviate or comb	ine names	——————————————————————————————————————		
Adams Homes, L							
OR 16. INDIVIDUAL'S LAST NAME			FIRST NAME	MIDDLE	MIDDLE NAME		
	·· ·····			14110066	MIDDLE NAME		
c. MAILING ADDRESS			CITY	CITY		COUNTRY	
101 Gulf Breeze Parkway Suite 229			Gulf Breeze	FL	POSTAL CODE 32561	US	
d. TAX ID #: SSN OR EIN	ADD'L INFO RE 1e. TYPE OF ORGANIZATION ORGANIZATION Limited Liability Co.		1f. JURISDICTION OF ORGAN	·	1g. ORGANIZATIONAL ID #, if any		
			Alabama	3	DLL 656-401		
ADDITIONAL DERTOR						N	
2a. ORGANIZATION'S NA	براجعت ومنطق بالمكاري والإستان ومنظور فكالمراج والمساورين	LEGAL NAME - insert only one of	reptor name (Za or Zb) - do not abi	previate or compine names	······································		
		•					
26. INDIVIDUAL'S LAST	NAME	· · · · · · · · · · · · · · · · · · ·	FIRST NAME	MIDDLE	MIDDLE NAME		
2c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY	
d. TAX ID #: SSN OR EIN	1	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGAN	IZATION 2g. ORG	ANIZATIONAL ID #, if any		
	ORGANIZATION DEBTOR	· 	;	· · · · · · · · · · · · · · · · · · ·		Пи	
SECURED PARTY'S	NAME (or NAME of	of TOTAL ASSIGNEE of ASSIGNOR	S/P) - insert only one secured pa	ty name (3a or 3b)			
3a. ORGANIZATION'S NA							
Ohio Savings Ba	nk						
3b. INDIVIDUAL'S LAST NAME			FIRST NAME	MIDDLE	MIDDLE NAME		
c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY	
1801 East Ninth Street			Cleveland	OH	44114	US	
. This FINANCING STATEME	NT covers the follow	ring collateral:					
See attached Exhi	bit "A" attach	ed hereto and made a pa	art hereof				
• • • • • • •	• . • •		tgage Book 200	1 Anna Manager	rach		

5. ALTERNATIVE DESIGNATION [if applicable]: LESSE	E/LESSOR CONSIGNEE/CONSIG	NOR BAILEE/BAILOR	SELLER/BUYER	AG. LIEN	NON-UCC FILING
6 17 This FINANCING STATEMENT is to be filed [for record ESTATE RECORDS. Attach Addendum	d] (or recorded) in the REAL 7. Check [if applicable] [ADD]	to REQUEST SEARCH REPOR	T(S) on Debtor(s) [optional]	All Debtors	Debtor 1 Debtor 2
8. OPTIONAL FILER REFERENCE DATA					
AUYS	58.11/642				

Exhibit "A"

Lot 41, according to the plat of CEDAR MEADOWS, also a Resurvey of Lot 6, Block 1 of Mountain View Estates, as recorded in Map book 4, Page 19, in the Office of the Judge of Probate of Shelby County, Alabama, as recorded as Document Number 20050317000119380.

20060206000058060 2/2 \$28.00 Shelby Cnty Judge of Probate, AL 02/06/2006 08:56:43AM FILED/CERT