



				02/08	/2006 12:54:06PM	FILED/CERT
UCC FINANCING	STATEMENTAMENDME	ENT				
FOLLOW INSTRUCTIONS	(front and back) CAREFULLY					
A. NAME & PHONE OF CO Ann Moore	ONTACT AT FILER [optional]					
B. SEND ACKNOWLEDGN	MENT TO: (Name and Address)					
Compass B						
4958 Valley Rirminghan	n, Al. 3522242					
	11, 1 11.					
			THE ABOVE SPA	CE IS FO	R FILING OFFICE USE	E ONLY
1a. INITIAL FINANCING STATI	EMENT FILE#			1b. This	FINANCING STATEMEN	TAMENDMENT is
200407290004220)70	·	to be filed [for record] (or recorded) in the REAL ESTATE RECORDS.			
2. TERMINATION: Effe	ectiveness of the Financing Statement identified abo	ove is terminated with respe	ect to security interest(s) of the S	Secured Par	ty authorizing this Terminat	ion Statement.
3. CONTINUATION: E continued for the addition	ffectiveness of the Financing Statement identified onal period provided by applicable law.	above with respect to sec	urity interest(s) of the Secured	Party author	orizing this Continuation St	tatement is
	r partial): Give name of assignee in item 7a or 7b					
	INFORMATION): This Amendment affects	الراجي والمستمول والمرافق المستماع والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع				
	ring three boxes and provide appropriate information					
CHANGE name and/or a	address: Give current record name in item 6a or 6b in item 7a or 7b and/or new address (if address cha	o; also give new Diange) in item 7c.	ELETE name: Give record name be deleted in item 6a or 6b.		DD name: Complete item 7. m 7c; also complete items	
6. CURRENT RECORD INF						
6a. ORGANIZATION'S NA		•				
1	and Chelsea Park Properties, Ltd				ALASACT	
66. INDIVIDUAL'S LAST	6b. INDIVIDUAL'S LAST NAME		FIRST NAME		NAME	SUFFIX
7. CHANGED (NEW) OR AL		·····	······································	 		
7b. INDIVIDUAL'S LAST NAME		FIRST NAME	FIRST NAME		NAME	SUFFIX
7c. MAILING ADDRESS		CITY	CITY		POSTAL CODE	COUNTRY
			+			
7d. TAX ID #: SSN OR EIN	ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION	N 7f. JURISDICTION	OF ORGANIZATION	7g. ORG	ANIZATIONAL ID #, if any	
	DEBTOR					NONE
•	TERAL CHANGE): check only one box.	11 - 4 4				
Describe collateral Manager	eted or added, or give entire restated co	illateral description, or des	cribe collateral [] assigned.			
PARTIAL						
·	to the Map and Survey of Chelses	a Park, 1st Sector,	Phase I & II, as reco	rded in	Map Book 34, Pag	ge 21 A & B
in the Probate Office	e of Shelby County, Alabama.					
	PARTY OF RECORD AUTHORIZING THIS authorizing Debtor, or if this is a Termination autho	•		•		by a Debtor which
9a. ORGANIZATION'S N		niked by a Deblor, check he	and entername of DEB		nking ins Amendment.	
Compass BAnl						
OPI			FIRST NAME		NAME	SUFFIX
10. OPTIONAL FILER REFERE	NCE DATA					