

C FINANCING STATEMENT AMENDMENT							
LLOW INSTRUCTIONS (front and back) CAREFULLY NAME & PHONE OF CONTACT AT FILER [optional]				,, 200			
. RUFFIN/205.226.1902							
SEND ACKNOWLEDGMENT TO: (Name and Address)							
ALABAMA POWER COMPANY 600 NORTH 18TH STREET							
BIRMINGHAM, AL 35291							
		THE ABO	VE SPACE	IS FO	R FILING OFFICE US	E ONLY	
. INITIAL FINANCING STATEMENT FILE #				. This	FINANCING STATEMEN	IT AMENDME	
20041115000626830/SHELBY				to b	e filed [for record] (or record).	orded) in the	
✓ TERMINATION: Effectiveness of the Financing Statement ide	entified above is	terminated with respect to security interest(s	s) of the Secu				
CONTINUATION: Effectiveness of the Financing Statement	t identified abov	e with respect to security interest(s) of the	Secured Par	ty autho	orizing this Continuation S	Statement is	
continued for the additional period provided by applicable law.							
ASSIGNMENT (full or partial): Give name of assignee in item	n 7a or 7b and a	ddress of assignee in item 7c; and also give	name of assi	gnor in	item 9.		
AMENDMENT (PARTY INFORMATION): This Amendment a	Second		k only one of	these	two boxes.		
Also check one of the following three boxes and provide appropriate			ord name	<b>-</b> - 1 ∧ Γ	D name: Complete item :	7a or 7h and a	
CHANGE name and/or address: Give current record name in item name (if name change) in item 7a or 7b and/or new address (if a	in oa or op, also iddress change)	in item 7c. to be deleted in item 6a of		ite	m 7c; also complete items	7d-7g (if appli	
CURRENT RECORD INFORMATION:				·		· <u></u>	
6a. ORGANIZATION'S NAME							
6b. INDIVIDUAL'S LAST NAME		FIRST NAME	М	MIDDLE NAME SUF		SUFFIX	
COYTE		DAVID	E				
CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME	<del></del>			<del></del>		<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>	
7b. INDIVIDUAL'S LAST NAME		FIRST NAME		IDDLE	NAME	SUFFIX	
COYTE		KELLY		•			
COLLE		CITY	S	TATE	POSTAL CODE	COUNT	
			i		125051		
MAILING ADDRESS O1 GIBSON FARM RD		COLUMBIANA	A		35051		
MAILING ADDRESS  01 GIBSON FARM RD  ADD'L INFO RE 7e. TYPE OF ORGA	ANIZATION			, , , , , , , , , , , , , , , , , , ,	ANIZATIONAL ID #, if any	<u> </u>	
MAILING ADDRESS 01 GIBSON FARM RD	ANIZATION	COLUMBIANA		, , , , , , , , , , , , , , , , , , ,			
ADD'L INFO RE 7e. TYPE OF ORGAL ORGANIZATION DEBTOR		COLUMBIANA		, , , , , , , , , , , , , , , , , , ,			
AMENDMENT (COLLATERAL CHANGE): check only one both	OX.	7f. JURISDICTION OF ORGANIZATION	7(	, , , , , , , , , , , , , , , , , , ,			
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