

OLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional]			
Ann Moore			
3. SEND ACKNOWLEDGMENT TO: (Name and Address)			
Compass Bank 4958 Valleydale Road, Suite 101 Birmingham, Al. 35242			
	THE A	BOVE SPACE IS FOR FILING OFFICE	USE ONLY
a. INITIAL FINANCING STATEMENT FILE # 20040729000422070		1b. This FINANCING STATEN to be filed [for record] (or REAL ESTATE RECORD	MENT AMENDMENT is
TERMINATION: Effectiveness of the Financing Statement			
CONTINUATION: Effectiveness of the Financing Statem continued for the additional period provided by applicable la		the Secured Party authorizing this Continuation	JII Statement is
. ASSIGNMENT (full or partial): Give name of assignee in			
. AMENDMENT (PARTY INFORMATION): This Amendme Also check one of the following three boxes and provide appropri			
CHANGE name and/or address: Give current record name in name (if name change) in item 7a or 7b and/or new address. CURRENT RECORD INFORMATION:	n item 6a or 6b; also give new DELETE name: Give (if address change) in item 7c to be deleted in item 6		em 7a or 7b, and also ems 7d-7g (if applicable
6a. ORGANIZATION'S NAME Chelsea Park, Inc. and Chelsea Park Prope			
OLLOWOR & GLIE, LLEV. GLIG OLIVIOVG & GLIK & LOP	erties, Ltd.		
6b. INDIVIDUAL'S LAST NAME	erties, Ltd. FIRST NAME	MIDDLE NAME	SUFFIX
6b. INDIVIDUAL'S LAST NAME		MIDDLE NAME	SUFFIX
		MIDDLE NAME	SUFFIX
6b. INDIVIDUAL'S LAST NAME 7. CHANGED (NEW) OR ADDED INFORMATION:		MIDDLE NAME	SUFFIX
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6b. INDIVIDUAL'S LAST NAME 7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME 7c. MAILING ADDRESS 7d. TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF OF ORGANIZATION	FIRST NAME FIRST NAME CITY RGANIZATION 7f. JURISDICTION OF ORGANIZATIO 12 box.	MIDDLE NAME STATE POSTAL CODE ON 7g. ORGANIZATIONAL ID #, if	SUFFIX COUNTRY
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