



OLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional]				
Ann Moore				
B. SEND ACKNOWLEDGMENT TO: (Name and Address)				
Compass Bank 4958 Valleydale Road, Suite 101 Birmingham, Al. 35242				
	THE	ABOVE SPACE	IS FOR FILING OFFIC	E USE ONLY
a. INITIAL FINANCING STATEMENT FILE # 20040729000422070			1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS.	
2. TERMINATION: Effectiveness of the Financing Statement id	lentified above is terminated with respect to security int	erest(s) of the Secu	في التالي في التالي المستوالي المستوالي المستوالي المستوالي المستوالي المستوالي المستوالي المستوالي	بخالق يمحقق بمحقال بمقالتا منتقال الخماد المراباة
3. CONTINUATION: Effectiveness of the Financing Statement continued for the additional period provided by applicable law.	nt identified above with respect to security interest(s)	of the Secured Par	ty authorizing this Continua	tion Statement is
4. ASSIGNMENT (full or partial): Give name of assignee in iter	m 7a or 7b and address of assignee in item 7c; and als	o give name of assi	gnor in item 9.	
5. AMENDMENT (PARTY INFORMATION): This Amendment Also check one of the following three boxes and provide appropriate	trained describ	Check only one of	these two boxes.	
CHANGE name and/or address: Give current record name in ite name (if name change) in item 7a or 7b and/or new address (if a			ADD name: Complete item 7c; also complete	item 7a or 7b, and also items 7d-7g (if applicable
S. CURRENT RECORD INFORMATION:				
Ga. ORGANIZATION'S NAME Chelsea Park, Inc. and Chelsea Park Propert	ies. Ltd.			
6b. INDIVIDUAL'S LAST NAME	FIRST NAME	M	IDDLE NAME	SUFFIX
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 ORGANIZATION DEPTOR	FIRST NAME CITY ANIZATION 7f. JURISDICTION OF ORGANIZATION	S	TATE POSTAL CODE ORGANIZATIONAL ID #,	·
DEBTOR 3. AMENDMENT (COLLATERAL CHANGE): check only one b				NON
PARTIAL Lot 4-51, according to the Map and Survey of Office of Shelby County, Alabama.			ok 34, Page 147 in	the Probate
9. NAME OF SECURED PARTY OF RECORD AUTHORIZI	·	•	If this is an Amendment auth Rauthorizing this Amendme	•
9a. ORGANIZATION'S NAME				
	FIRST NAME		IDDLE NAME	SUFFIX