	200609070004 Shelby Cnty 09/07/2006 0
UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY	

20060907000441100 1/1 \$28.00	11 m mtg
Shelby Cnty Judge of Probate	Δì
09/07/2006 09:08:49AM FILED/	ERT

UCC FINANCING STATEMENT AMENDMEN	JT		
	41		
FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] Cathy Padgett, 497-4293			
B. SEND ACKNOWLEDGMENT TO: (Name and Address)			
D. SEIND ACKNOVILLOGIVILINI TO. (Name and Address)			
Compass Bank			
4958 Valleydale Road, Suite 101			
Birmingham, AL 35242-4614			
	THE ABOVE SP	ACE IS FOR FILING OFFICE	USE ONLY
1a. INITIAL FINANCING STATEMENT FILE #		1b. This FINANCING STATEM	
20050204000058840		to be filed [for record] (or record) (or record)	
2. TERMINATION: Effectiveness of the Financing Statement identified above	is terminated with respect to security interest(s) of the	Secured Party authorizing this Tern	sination Statement.
3. CONTINUATION: Effectiveness of the Financing Statement identified about	ove with respect to security interest(s) of the Secure	d Party authorizing this Continuation	n Statement is
continued for the additional period provided by applicable law.	,		
4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and	address of assignee in item 7c; and also give name of	f assignor in item 9.	
5. AMENDMENT (PARTY INFORMATION): This Amendment affects De			
Also check one of the following three boxes and provide appropriate information in		<u>vije</u> di lijese lwo boxes.	
CHANGE name and/or address: Give current record name in item 6a or 6b; als	so give new TDELETE name: Give record name	ne ADD name: Complete ite	m 7a or 7b, and also
name (if name change) in item 7a or 7b and/or new address (if address change	e) in item 7c. to be deleted in item 6a or 6b.	item 7c; also complete ite	
6. CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME	······································	——————————————————————————————————————	
Thornton Construction Co., Inc.			
OR 6b. INDIVIDUAL'S LAST NAME			
OD. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
7. CHANGED (NEW) OR ADDED INFORMATION:			
7a. ORGANIZATION'S NAME			
OR			
7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
		l l	
d. TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if a	any
ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if a	·
ORGANIZATION DEBTOR	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if a	
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ORGANIZATION DEBTOR			
ORGANIZATION DEBTOR 3. AMENDMENT (COLLATERAL CHANGE): check only one box. Describe collateral deleted or added, or give entire restated collater	ral description, or describe collateral assigned.		NONE
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