



UCC FINANCING STATEMENT AMENDMEN			
FOLLOW INSTRUCTIONS (front and back) CAREFULLY			
A. NAME & PHONE OF CONTACT AT FILER [optional]			
J. RUFFIN/205.226.1902			
B. SEND ACKNOWLEDGMENT TO: (Name and Address)			
ALABAMA POWER COMPANY 600 NORTH 18TH STREET			
BIRMINGHAM, AL 35291			
	THE ABOVE SP	ACE IS FOR FILING OFFICE USE	
1a. INITIAL FINANCING STATEMENT FILE #		1b. This FINANCING STATEMENT to be filed [for record] (or record REAL ESTATE RECORDS.	
20030328000186400/SHELBY			
2. / TERMINATION: Effectiveness of the Financing Statement identified above			
3. CONTINUATION: Effectiveness of the Financing Statement identified about continued for the additional period provided by applicable law.	ove with respect to security interest(s) of the Secure	d Party authorizing this Continuation Sta	tement is
4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and		المتاب المتناب والمتاب والمتاب والمتاب والمتاب والمتاب والمتاب والمتاب والمتناب والمتاب والمتاب والمتاب والمتاب	
5. AMENDMENT (PARTY INFORMATION): This Amendment affects De	· — · · · · · · · · · · · · · · · · · ·	ne of these two boxes.	
Also check one of the following three boxes and provide appropriate information in		a Port ADD names Camplete Store 70	ar 7h. and also
CHANGE name and/or address: Give current record name in item 6a or 6b; als name (if name change) in item 7a or 7b and/or new address (if address change	DELETE name: Give record name) in item 7c. to be deleted in item 6a or 6b.	ne ADD name: Complete item 7a item 7c; also complete items 7	d-7g (if applicable).
6. CURRENT RECORD INFORMATION:			
6a. ORGANIZATION'S NAME			
		······································	
6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
MASSEY	WILLIAM	THOMAS	
7. CHANGED (NEW) OR ADDED INFORMATION:			
7a. ORGANIZATION'S NAME			
7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
MASSEY	THELMA		
7c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
204 11TH STREET SW	ALABASTER	AL 35007	
ADD'L INFO RE 7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if any	
ORGANIZATION DEBTOR			NONE
8. AMENDMENT (COLLATERAL CHANGE): check only one box.			
Describe collateral deleted or added, or give entire restated collate	ral description, or describe collateral lassigned		
Describe conateral I deleted of Ladded, of give entire Lifestated conate	ial description, or describe confideral Lassigness.		
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AM	MENDMENT (name of assignor, if this is an Assignment	ent). If this is an Amendment authorized b	y a Debtor which
adds collateral or adds the authorizing Debtor, or if this is a Termination authorized			
9a. ORGANIZATION'S NAME	<u></u>		<u>, , , , , , , , , , , , , , , , , , , </u>
ALABAMA POWER COMPANY			
OR 9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
40 OPTIONAL EILED DECEDENCE DATA			
10. OPTIONAL FILER REFERENCE DATA			