NAME & PHONE OF CONT. RUFFIN/205.226.190 SEND ACKNOWLEDGMEN ALABAMA POY 600 18TH STRE BIRMINGHAM, INITIAL FINANCING STATEME 20060509000217360	ACT AT FILER [optional] D2 TTO: (Name and Address) WER COMPANY ET NORTH AL 35291	2007 Sheji 03/2	70326000134320 1/1 \$.00 by Cnty Judge of Probate, A 26/2007 11:12:00AM FILED/CE	IL RT
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			1b. This FINANCING STATEMENT Ato be filed [for record] (or record)	
A LEIGHTANTION, ENGLIS	ness of the Financing Statement identified above is	terminated with respect to security interest(s) of the	REAL ESTATE RECORDS.	
CONTINUATION: Effect	veness of the Financing Statement identified above			
	period provided by applicable law.			
ASSIGNMENT (full or par	tial): Give name of assignee in item 7a or 7b and a	ddress of assignee in item 7c; and also give name	of assignor in item 9.	
	ORMATION): This Amendment affects Deb		one of these two boxes.	
—·	nree boxes <u>and</u> provide appropriate information in it		ame F'''I ADD name: Complete item 7a d	or 7b. and also
	ess: Give current record name in item 6a or 6b; also m 7a or 7b and/or new address (if address change)	in item 7c. to be deleted in item 6a or 6b.	ame ADD name: Complete item 7a ditem 7c; also complete items 7d	l-7g (if applicable
6a. ORGANIZATION'S NAME				
OR 6b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
ELLIOT-POOLE		VIRGINIA	B.	
CHANGED (NEW) OR ADDE				
7a. ORGANIZATION S NAME				
7b. INDIVIDUAL'S LAST NAM	E	FIRST NAME	MIDDLE NAME	SUFFIX
POOLE		WILLIAM	H.	IV
MAILING ADDRESS		CITY	STATE POSTAL CODE	COUNTRY
97 OLD CAHABA W		HELENA	AL 35080	
OF	D'L INFO RE 7e. TYPE OF ORGANIZATION RGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if any	
	BTOR			NO
-	AL CHANGE): check only <u>one</u> box. or added, or give entire restated collatera	description or describe collateral assigne	d	
Describe conateral Lucietes	added, or give entirerestated conlatera	assigne	u.	