UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY		T	20070511000222160 1/1 \$.00 Shelby Cnty Judge of Probate, AL 05/11/2007 11:11:58AM FILED/CERT		
	ONTACT AT FILER [optional]				
3. SEND ACKNOWLEDGN	MENT TO: (Name and Address)				
Alabama Pow	er Company				
Attn: Rod No	- · · ·				
P O Box 129					
Anniston, AL	36202				
		THE ABOVE S		S FINANCING STATEMENT	
1a. INITIAL FINANCING STATI		ed 07/01/2002	to I	s FINANCING STATEMENT be filed [for record] (or record AL ESTATE RECORDS.	
2. X TERMINATION: Effe	ectiveness of the Financing Statement identified above is	s terminated with respect to security interest(s) of th	e Secured Pa	rty authorizing this Terminate	on Statement.
r i	iffectiveness of the Financing Statement identified about onal period provided by applicable law.	ve with respect to security interest(s) of the Secur	ed Party auth	orizing this Continuation Sta	atement is
	r partial): Give name of assignee in item 7a or 7b and a	address of assignee in item 7c; and also give name	of assignor in	item 9.	
	INFORMATION): This Amendment affects Det				
	ing three boxes <u>and</u> provide appropriate information in it				
CHANGE name and/or a name (if name change)	address: Give current record name in item 6a or 6b; also in item 7a or 7b and/or new address (if address change)	o give new DELETE name: Give record na to be deleted in item 6a or 6b.	rme Ai	DD name: Complete item 7a rn 7c; also complete items 7	or 7b, and also d-7g (if applica
6. CURRENT RECORD INF	ORMATION:				
6a. ORGANIZATION'S NA	AME				
OR 6b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	MIDDLE NAME SUFF	
Jordan		Bridgette	D		
. CHANGED (NEW) OR AD	DDED INFORMATION:				
7a. ORGANIZATION'S NA					
)R					
76. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	NAME	SUFFIX
Hordon		Bridgette	D	DOSTAL CODE	COUNTRY
Jordon		Vincent	STATE	POSTAL CODE 35178	
c. MAILING ADDRESS			I A I		IUSA
c. MAILING ADDRESS 89 Fleming Rd	ADD'L INFO RE 7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	AL 7g. ORG	SANIZATIONAL ID #, if any	USA
c. MAILING ADDRESS 89 Fleming Rd	ORGANIZATION 1				
c. MAILING ADDRESS 89 Fleming Rd d. TAX ID #: SSN OR EIN	ORGANIZATION DEBTOR				
7c. MAILING ADDRESS 89 Fleming Rd 7d. TAX ID #: SSN OR EIN 8. AMENDMENT (COLLA)	ORGANIZATION 1	7f. JURISDICTION OF ORGANIZATION	7g. ORG		
7c. MAILING ADDRESS 89 Fleming Rd 7d. TAX ID #: SSN OR EIN 8. AMENDMENT (COLLA) Describe collateral dele	ORGANIZATION DEBTOR TERAL CHANGE): check only one box. eted or added, or give entire restated collaters	7f. JURISDICTION OF ORGANIZATION	7g. ORG		
7c. MAILING ADDRESS 89 Fleming Rd 7d. TAX ID #: SSN OR EIN 8. AMENDMENT (COLLA) Describe collateral dele (1) 13 seet Amana	ORGANIZATION DEBTOR TERAL CHANGE): check only one box. eted or added, or give entire restated collaters	7f. JURISDICTION OF ORGANIZATION	7g. ORG		
7c. MAILING ADDRESS 89 Fleming Rd 7d. TAX ID #: SSN OR EIN B. AMENDMENT (COLLA) Describe collateral deleteral (1) 13 seet Amana model # RHE36A2	ORGANIZATION DEBTOR TERAL CHANGE): check only one box. eted or added, or give entire restated collaters unit	7f. JURISDICTION OF ORGANIZATION	7g. ORG		
7c. MAILING ADDRESS 89 Fleming Rd 7d. TAX ID #: SSN OR EIN 8. AMENDMENT (COLLA) Describe collateral dele (1) 13 seet Amana model # RHE36A2	ORGANIZATION DEBTOR TERAL CHANGE): check only one box. eted or added, or give entire restated collaters unit D; serial # 0205100935	7f. JURISDICTION OF ORGANIZATION	7g. ORG		
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