

UCC FINANCING STATEMENT AMENDM FOLLOW INSTRUCTIONS (front and back) CAREFULLY	ENT			
A. NAME & PHONE OF CONTACT AT FILER [optional] Cathy Padgett: 297-4293				
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	···- <u>-</u> ,			
Compass Bank				
4958 Valleydale Road				
Suite 101				
Birmingham, AL 35242				
Dirining 1111 502 12				
<u></u>	——) TH	E ABOVE SPACE IS	FOR FILING OFFICE USE	ONLY
1a. INITIAL FINANCING STATEMENT FILE # 20050204000058840		t	This FINANCING STATEMENT to be filed [for record] (or record REAL ESTATE RECORDS.	
2. TERMINATION: Effectiveness of the Financing Statement identified a	have is terminated with respect to security			ion Statement
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3. CONTINUATION: Effectiveness of the Financing Statement identification continued for the additional period provided by applicable law.	ad above with respect to security interest(s	s) of the Secured Party at	ithorizing this Continuation St	atement is
4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7	b and address of assignee in item 7c; and a	also give name of assignor	in item 9.	
5. AMENDMENT (PARTY INFORMATION): This Amendment affects	Debtor or Secured Party of record	d. Check only one of the	se two boxes.	
Also check one of the following three boxes and provide appropriate informat	ion in items 6 and/or 7.			
CHANGE name and/or address: Give current record name in item 6a or	6b; also give new DELETE name:		ADD name: Complete item 7	*
name (if name change) in item 7a or 7b and/or new address (if address of	change) in item 7c to be deleted in i	tem ba or bb.	item 7c; also complete items	ru-rg (ii applicable).
6. CURRENT RECORD INFORMATION: 6. CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME		. - -		
Thornton Construction Company, Inc. and Hollan	d Lakes, Inc			
R 6b. INDIVIDUAL'S LAST NAME		MIDDI	LE NAME	SUFFIX
OU. INDIVIDUAL S LAST MAINE	T I TOT I TANK			
· · · · · · · · · · · · · · · · · · ·				
7. CHANGED (NEW) OR ADDED INFORMATION:		. <u>.</u>		
7a. ORGANIZATION'S NAME				
OR			,	<u>.</u>
7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDD	MIDDLE NAME SUFF	
7c. MAILING ADDRESS	CITY	STAT	E POSTAL CODE	COUNTRY
7d. TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATIO	7f. JURISDICTION OF ORGANIZ	ATION 7g. O	RGANIZATIONAL ID #, if any	
ORGANIZATION '				NONE
DEBTOR				NONE
8. AMENDMENT (COLLATERAL CHANGE): check only one box.				
Describe collateral deleted or added, or give entire restated of	ollateral description, or describe collatera	alassigned.		
	077 11 17 1 0 1	1 1 2 3 6	D 1 2 4 D 0 5 '	41 - Du-14-
Partial Release: Lot 74, according to the Final Plat o		recorded in Map	Book 34, Page 85, 11	n the Probate
Office of Shelby County, Alabama; being situated in	Shelby County, Alabama.			
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THE	S AMENDMENT (name of assignor, if th	is is an Assignment). If thi	s is an Amendment authorized	by a Debtor which
adds collateral or adds the authorizing Debtor, or if this is a Termination auth				
9a. ORGANIZATION'S NAME		<u> </u>		
Compass Bank				
OR 9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDD	LE NAME	SUFFIX
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10. OPTIONAL FILER REFERENCE DATA				