



UCC FINANCING STATEMENT AMENDME	NT		
FOLLOW INSTRUCTIONS (front and back) CAREFULLY			
A. NAME & PHONE OF CONTACT AT FILER [optional] Ann Moore			
B. SEND ACKNOWLEDGMENT TO: (Name and Address)			
P. OLIVE ACINICATELECTIVILITY TO: (IVallic and Addices)	——————————————————————————————————————		
Compass Bank			
4958 Valleydale Road, Suite 101			
Birmingham, Al. 35242			
	THE ABOVE S	PACE IS FOR FILING OFFICE	
1a. INITIAL FINANCING STATEMENT FILE # 20070223000084990, 20070509000218090, 2007060)4000258060 and 20070604000258	1b. This FINANCING STATEM	recorded) in the
2. TERMINATION: Effectiveness of the Financing Statement identified above	<u></u>	TENE EQUATION AND AND AND AND AND AND AND AND AND AN	
3. CONTINUATION: Effectiveness of the Financing Statement identified at		· · · · · · · · · · · · · · · · · · ·	
continued for the additional period provided by applicable law.			
4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b an	d address of assignee in item 7c; and also give name	of assignor in item 9.	
5. AMENDMENT (PARTY INFORMATION): This Amendment affects	Debtor or Secured Party of record. Check only	y <u>one</u> of these two boxes.	
Also check one of the following three boxes and provide appropriate information is			
CHANGE name and/or address: Give current record name in item 6a or 6b; a name (if name change) in item 7a or 7b and/or new address (if address change)	ge) in item 7c. DELETE name: Give record name) be deleted in item 6a or 6b.	ame ADD name: Complete ite item 7c; also complete ite	
6. CURRENT RECORD INFORMATION:		······································	
Eddleman Homes, LLC, Courtside Development, Du	unavant Place Highland Lakes Hon	nes Park Homes & Reger	nt Park Homes
OR 6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
7. CHANGED (NEW) OR ADDED INFORMATION:	· · · · · · · · · · · · · · · · · · ·	· · ·	
7a. ORGANIZATION'S NAME	<u>, </u>		
OR			
7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
			0011117017
7c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
7d. TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if	anv
ORGANIZATION DEBTOR		g. ottorute.	
8. AMENDMENT (COLLATERAL CHANGE): check only one box.			NONE
Describe collateral deleted or added, or give entire restated collate	teral description, or describe collateral assigne	ed.	
PARTIAL			
Lot 10-7, according to the Plat of Chelsea Park 10th Sec	tor, as recorded in Man Book 37, P	age 12, in the Office of th	ne Indge of
Probate of Shelby County, Alabama.	nor, as recorded in map book 57, 1	ago 12, in the Office of the	io suage or
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS A	MENDMENT (name of assignor, if this is an Assign	ment). If this is an Amendment author	rized by a Debtor which
adds collateral or adds the authorizing Debtor, or if this is a Termination authorize			•
9a. ORGANIZATION'S NAME		······································	
Compass Bank			
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
10, OPTIONAL FILER REFERENCE DATA			