432.35



20070823000398460 1/2 \$32.35 Shelby Cnty Judge of Probate,AL 08/23/2007 01:06:28PM FILED/CERT

UCC FINANCING STATEMENT

A. NAME & PHONE OF CONTACT AT FILER [optional]

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

ALABAMA GAS GRP.

20 South 20th Street

Birmingham, AL 35295

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEB	TOR'S EXACT FU	ILL LEGAL NAME	E - insert only <u>one</u> debtor name (1a	or 1b) - do not abbreviate or combine names			
1a. C	RGANIZATION'S NA	ME					
						<u></u>	······································
OR 1b. II	NDIVIDUAL'S LAST N	AME		FIRST NAME	MIDDLE	NAME	SUFFIX
	BILER	RELL_		STACIE			
1c. MAILI	NG ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY
20	L STON	ECROF	TDRIVE	HELENA	AL	35080	USA.
1d. TAX II		ADD'L INFO RE ORGANIZATION	1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION	1g. ORGA	ANIZATIONAL ID #, if any	NONE
2 4001	TIONAL DEBTOR	·	LEGAL NAME - insert only one d	ebtor name (2a or 2b) - do not abbreviate or com	oine names		
	ORGANIZATION'S NA		LECTULITY (IVIE IIIOOIT OIII) OIIO O	obtor riamo (Ea or Eb) de morabbromato or dom		· · -	
OR 2b. II	R 2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME		SUFFIX	
2c. MAILI	NG ADDRESS	· · · · ·		CITY	STATE	POSTAL CODE	COUNTRY
					<u>.</u>		
2d. TAX II	D#: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR AL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine name (2a or 2b) - do not abbreviate or combine name (2b) - do not abbreviate or combine name (2c) - d	2g. ORG	2g. ORGANIZATIONAL ID #, if any			
		•	1			STATE POSTAL CODE AL 35080 1g. ORGANIZATIONAL ID #, if any NONE e names MIDDLE NAME STATE POSTAL CODE COUNTRY NONE 2g. ORGANIZATIONAL ID #, if any NONE	
3. SECI	JRED PARTY'S	NAME (or NAME of	of TOTAL ASSIGNEE of ASSIGNOR	S/P) - insert only <u>one</u> secured party name (3a or	3b)		
1	ORGANIZATION'S NA						
	DI DRAN	1A GAS	GAPORATI	ani			
OR 3b. II	NDIVIDUAL'S LAST N	IAME		FIRST NAME	MIDDLE	NAME	SUFFIX
3c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY	
20.	SOUTH	20TH	STREET	BIRMINGHAM	AL	35295	USA.
	NANCING STATEME		·-				

CONDENSER COIL

M/N CAPF3636A6 S/N 0706682173 M/N GSC130361 S/N 0706733360

\$ 2850.00

5. ALTERNATIVE DESIGNATION [if applicable]: LESSEE/LESSOR	CONSIGNEE/CONSIGNOR	BAILEE/BAILOR	SELLER/BUYER	AG. LIEN	NON-UCC FILING
6. This FINANCING STATEMENT is to be filed [for record] (or recorded) in ESTATE RECORDS. Attach Addendum	n the REAL 7. Check to REQI [if applicable] [ADDITIONAL	UEST SEARCH REPORT	T(S) on Debtor(s) optional	All Debtors	Debtor 1 Debtor 2
8. OPTIONAL FILER REFERENCE DATA					

OLLOW INSTRUCTIONS (front and bac					
9. NAME OF FIRST DEBTOR (1a or 1b) 9a. ORGANIZATION'S NAME	ON RELATED FINANCING ST	ATEMENT			
19a. ORGANIZATION STRAIVIL					
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX			
BURRELL	STACIE				
). MISCELLANEOUS:					
		THE	ABOVE SPACE	IS FOR FILING OFF	CE USE ONLY
1. ADDITIONAL DEBTOR'S EXACT FU	JLL LEGAL NAME - insert only on	e name (11a or 11b) - do not abbreviate or comb	oine names		
11a. ORGANIZATION'S NAME					
R					
11b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	NAME	SUFFIX
c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
		446 11 15 16 5 16 16 16 16 16 16 16 16 16 16 16 16 16		A B D D D D D D D D D D	
ld. TAX ID #: SSN OR EIN ADD'L INFO RE ORGANIZATIO		11f. JURISDICTION OF ORGANIZATION	11g. OR0	SANIZATIONAL ID #, if a	any
DEBTOR					NO
2. ADDITIONAL SECURED PART 12a. ORGANIZATION'S NAME	Y'S or ASSIGNOR S/P	'S NAME - insert only <u>one</u> name (12a or 12b))		······································
	leating 4	- Air Conditio.	1106		
12b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	NAME	SUFFIX
c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
201 Stanoon	At Drive	Helpan	AL	35080	HSA
3. This FINANCING STATEMENT covers	timber to be cut or as-extracted	16. Additional collateral description:			
collateral, or is filed as a fixture filing.					
. Description of real estate:					
α . CL	^				
201. Stoncro	Ft Drive				
Helena, AL	35080				
- 11 -1	_				
ield stone Pa	JRK				
ase 1 3Rd Sc	- c-top				
	_				
PBK 13 86	113 45309				
יוכן ץ					
5. Name and address of a RECORD OWNER	of above-described real estate				
(if Debtor does not have a record interest):					
		17. Check only if applicable and check only	y one box.		
		Debtor is a Trust or Trustee actin	ng with respect to pr	operty neig in trust or	Decedent's Esta
		Debtor is a Trust or Trustee acting 18. Check only if applicable and check only		operty neid in trust or	Decedent's Esta
				operty neid in trust or	Decedent's Esta
		18. Check <u>only</u> if applicable and check <u>only</u>	y one box.		Decedent's Esta