

LICC EINANCING STATEMENT AMENDMEN

	FINANCING STATEMENT AMENDMEN'S WINSTRUCTIONS (front and back) CAREFULLY	T						
	ME & PHONE OF CONTACT AT FILER [optional]	· · · · · · · · · · · · · · · · · · ·						
	y Padgett: 297-4293							
	ND ACKNOWLEDGMENT TO: (Name and Address)	· · · ·						
		-]					
	Compass Bank							
	4958 Valleydale Road, Suite 101							
	Birmingham, AL 35242							
			THE ABOVE SP	ACE IS	FOR FILING OFFICE USE	ONLY		
	TIAL FINANCING STATEMENT FILE #				This FINANCING STATEMENT to be filed [for record] (or record		NT is	
	061114000556650				REAL ESTATE RECORDS. Party authorizing this Terminal	ion Statement		
	TERMINATION: Effectiveness of the Financing Statement identified above is							
ш	CONTINUATION: Effectiveness of the Financing Statement identified above continued for the additional period provided by applicable law.	-				#		
	ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and a						·····	
5. AM	ENDMENT (PARTY INFORMATION): This Amendment affects Deb	otor <u>or</u> Sec	cured Party of record. Check only g	<u>one</u> of the	se two boxes.			
Also	check <u>one</u> of the following three boxes <u>and</u> provide appropriate information in its	ems 6 and/or 7.				s or 7h and a	des	
П	CHANGE name and/or address: Give current record name in item 6a or 6b; also name (if name change) in item 7a or 7b and/or new address (if address change)	give new in item 7c.	DELETE name: Give record name to be deleted in item 6a or 6b.	ne 🗀	ADD name: Complete item 7: item 7c; also complete items	7d-7g (if appli	icable).	
6. CU	RRENT RECORD INFORMATION: a. ORGANIZATION'S NAME							
	Thornton Construction Co., Inc. and Holland Lakes, Inc.							
	o, INDIVIDUAL'S LAST NAME	FIRST NAME		MIDD	MIDDLE NAME		SUFFIX	
						ļ		
	ANGED (NEW) OR ADDED INFORMATION:	· · · · ·						
′	B. ORGANIZATION S NAME							
OR -	b. INDIVIDUAL'S LAST NAME	FIRST NAME	FIRST NAME		MIDDLE NAME		(
ľ	7 B. HADIANDONE O ENGLINA							
70.14	AILING ADDRESS	CITY		STA	STATE POSTAL CODE		TRY .	
7 Ç. M	MEING ADDICESS							
7d. TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR		7f. JURISDICTION OF ORGANIZATION		7g. C	7g. ORGANIZATIONAL ID #, if any			
				NONE				
8. AN	MENDMENT (COLLATERAL CHANGE): check only one box.							
De	scribe collateral deleted or added, or give entire restated collater	al description, o	r describe collateral assigned	i.				
						# D	0.6	
Par	tial Release: Lot 237, according to the final subdivision	on plat of H	Iolland Lakes, Sector 3,	as reco	orded in Map Book 3	7, Page 8	55,	
in t	he Probate Office of Shelby County, Alabama; being s	situated in S	Shelby County, Alabama	a.				
9. N	ME OF SECURED PARTY OF RECORD AUTHORIZING THIS AM	ENDMENT (na	ame of assignor, if this is an Assignment	nent). If ti	his is an Amendment authorize	d by a Debtor	which	
	ds collateral or adds the authorizing Debtor, or if this is a Termination authorized	Dy a Debtor, ch	and enter name of DE					
	Compass Bank			• • •				
- Op L	b. INDIVIDUAL'S LAST NAME	FIRST NAM	E	MID	DLE NAME	SUFFIX	K.	
						<u> </u>		
10.0	PTIONAL FILER REFERENCE DATA							