	AE NIT		
UCC FINANCING STATEMENT AMENDN FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional]		20071115000524350 1/1 5 Shelby Cnty Judge of Pr 11/15/2007 11:38:26AM F	robate Ol
J. RUFFIN/205.226.1902		7 7 7 7 2 0 0 7 1 1 : 30 : 20 H Y F	- ILED/CERT
B. SEND ACKNOWLEDGMENT TO: (Name and Address)			
ALABAMA POWER COMPANY 600 NORTH 18TH STREET			
BIRMINGHAM, AL 35291			
	THE ABO	VE SPACE IS FOR FILING OFFIC	E USE ONLY
1a. INITIAL FINANCING STATEMENT FILE# 2006/02/1000532090/54		1b. This FINANCING STAT	EMENT AMENDMENT is
		to be filed [for record] (REAL ESTATE RECOR	RDS.
2. TERMINATION: Effectiveness of the Financing Statement identified a			
3. CONTINUATION: Effectiveness of the Financing Statement identified continued for the additional period provided by applicable law.	a above with respect to security interest(s) of the	Secured Party authorizing this Continua	ation Statement is
4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7t	and address of assignee in item 7c; and also give	name of assignor in item 9.	
L		k only <u>one</u> of these two boxes.	
Also check one of the following three boxes and provide appropriate information of the following three boxes and provide appropriate information of the current record name in item 6a or 6		om name - FII ADD name: Complete	item 7a or 7b, and also
CHANGE name and/or address: Give current record name in item 6a or 6 name (if name change) in item 7a or 7b and/or new address (if address change). CURRENT RECORD INFORMATION:	nange) in item 7c. to be deleted in item 6a or	r 6b. ADD frame. Complete	items 7d-7g (if applicable).
6a. ORGANIZATION'S NAME			<u> </u>
OR 6b. INDIVIDUAL'S LAST NAME	FIRST NAME	IMINDLE NAME	SUFFIX
MILER	MIMAM		(1R
. CHANGED (NEW) OR ADDED INFORMATION:			
7a. ORGANIZATION'S NAME			
75. INDIVIQUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
Miller	Kin DERLY	I // //	
c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
6280- HighWay 17	Helena	144 3501	
ADD'L INFO RE JE. TYPE OF ORGANIZATION ORGANIZATION	7f. JURISDICTION OF UNGANIZATION	7g. ORGANIZATIONAL ID #,	if any
DEBTOR DECLIANCE:			NONE
3. AMENDMENT (COLLATERAL CHANGE): check only <u>one</u> box. Describe collateral deleted or added, or give entire restated coll		· •	
Describe condition [] deleted of [] added, of give entire [] restated con	ateral description, or describe collateralassi	gned.	
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NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS A	MENDMENT (name of assignor, if this is an Assi	ignment). If this is an Amendment author	orized by a Debtor which
adds collateral or adds the authorizing Debtor, or if this is a Termination authoriz	ed by a Debtor, check here and enter name of	DEBTOR authorizing this Amendmen	nt.
9a. ORGANIZATION'S NAME			
ALABAMA POWER COMPANY 96. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	CHECK
[provide the second contract of the second con	3 MILLOUGH MANGE	SUFFIX

10, OPTIONAL FILER REFERENCE DATA