UCC FINANCING STATEMENT AMENI FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional]	DMENT	20071115000524380 1/1 \$.00 Shelby Cnty Judge of Probate, AL	
J. RUFFIN/205.226.1902 B. SEND ACKNOWLEDGMENT TO: (Name and Address)		11/15/2007 11:38:29AM F	ILED/CERI
ALABAMA POWER COMPANY 600 NORTH 18TH STREET BIRMINGHAM, AL 35291			
	THE AE	BOVE SPACE IS FOR FILING OFFIC	E USE ONLY
1a. INITIAL FINANCING STATEMENT FILE # 2007/005000467190 St		1b. This FINANCING STATE to be filed [for record] (c	EMENT AMENDM
2. FINERMINATION: Effectiveness of the Financing Statement identified	d above is terminated with respect to security interes	DEAL COTATE DECOD	DC .
3. CONTINUATION: Effectiveness of the Financing Statement identified	tified above with respect to security interest(s) of the	e Secured Party authorizing this Continua	tion Statement is
4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 5. AMENDMENT (PARTY INFORMATION): This Amendment affects		وزجرا والمحافظ يبرك فالمتعاف المتناف المستران والمتناف المتناف المتناف المتناف المتناف المتناف المتناف المتناف	
Also check one of the following three boxes and provide appropriate inform	nation in items 6 and/or 7	eck only <u>one</u> of these two boxes.	
CHANGE name and/or address: Give current record name in item 6a of name (if name change) in item 7a or 7b and/or new address (if address	or 6b; also give new DELETE name: Give restance) in item 7c	cord name	tem 7a or 7b, and
6. CURRENT RECORD INFORMATION:	s change) in item 7c. to be deleted in item 6a	or 6b. item 7c; also complete i	tems /d-/g (if app
6a. ORGANIZATION'S NAME			 : ::
OR 66. INDIVIDUAL'S LAST NAME			
KERSE4	FIRST NAME	MIDDLE NAME	SUFFIX
. CHANGED (NEW) OR ADDED INFORMATION:	VERRY		
7a. ORGANIZATION'S NAME	<u></u>		·
R			
76. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
1 / ERSEY	LIBBY	4	
MANUAL ADDOCTOR	CITY //	STATE POSTAL CODE	
		STATE POSTAL CODE	COUNT
255 Hidden Kidge	Messea	11/2 3304	3
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ADD'L INFO RE 7e. TYPP OF ORGANIZATION ORGANIZATION DEBTOR AMENDMENT (COLLATERAL CHANGE): check only one box.	M 7f. JURISDICTION OF UNGANIZATION	7g. ORGANIZATIONAL ID #, if	3 any
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