

FOLLOW INSTRUCTIONS (front and back) CAREFULLY  A. NAME & PHONE OF CONTACT AT FILER [optional]			
Cathy Padgett: 297-4293			
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	· · · · · · · · · · · · · · · · · · ·		
Compass Bank 4958 Valleydale Road Suite 101 Birmingham, AL 35242			
1a. INITIAL FINANCING STATEMENT FILE #	THE ABO	1b. This FINANCING STATEM	
20050204000058840		to be filed [for record] (or re REAL ESTATE RECORDS	ecorded) in the
2. TERMINATION: Effectiveness of the Financing Statement ide	entified above is terminated with respect to security interest(s	s) of the Secured Party authorizing this Term	ination Statement.
3. CONTINUATION: Effectiveness of the Financing Statement continued for the additional period provided by applicable law.		Secured Party authorizing this Continuation	Statement is
4. ASSIGNMENT (full or partial): Give name of assignee in item	7a or 7b and address of assignee in item 7c; and also give	name of assignor in item 9.	
5. AMENDMENT (PARTY INFORMATION): This Amendment	<del></del>	k only <u>one</u> of these two boxes.	
Also check <u>one</u> of the following three boxes <u>and</u> provide appropriate  CHANGE name and/or address: Give current record name in iter		cord name	n 7a or 7b, and also
CHANGE name and/or address: Give current record name in item name (if name change) in item 7a or 7b and/or new address (if a 6. CURRENT RECORD INFORMATION:	ddress change) in item 7c to be deleted in item 6a o		ms 7d-7g (if applicable).
6a. ORGANIZATION'S NAME			
Holland Lakes, Inc. and Thornton Construction		A 44 CO COL CE A LA SACT	LOUEELY
6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
7 CHANCED (NEW) OR ADDED INFORMATION:			
7. CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME		<u>, , , , , , , , , , , , , , , , , , , </u>	<u> </u>
OR THE STATE OF MALES		<del></del>	
7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
7c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
7d. TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TYPE OF ORGANIZATION   DEBTOR	NIZATION 7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if a	NONE
8. AMENDMENT (COLLATERAL CHANGE): check only one be	OX.		
Describe collateral deleted or added, or give entire re	estated collateral description, or describe collateral	ssigned.	
Partial Release: Lot 85, according to the fina p	lat of Holland Lakes Sector Las record	ed in Man Book 34. Page 85.	
- Partial Release - Liu A y acconting to the Julia D	y County Alahama being situated in Sh	elby County, Alabama.	
in the Probate Office of Shelby	y Country, I habanna, come breaded in Sir		
in the Probate Office of Shelby	y Country, Triabanna, comig chaatea in Sir		
in the Probate Office of Shelby	y Country, Friadullia, doing broaded in Dir		
in the Probate Office of Shelby	y Country, Triabanna, comig breaatea in Si		
in the Probate Office of Shelby			
in the Probate Office of Shelby			
in the Probate Office of Shelby			
in the Probate Office of Shelby  9. NAME OF SECURED PARTY OF RECORD AUTHORIZI	NG THIS AMENDMENT (name of assignor, if this is an	Assignment). If this is an Amendment author	zed by a Debtor which
9. NAME OF SECURED PARTY OF RECORD AUTHORIZI adds collateral or adds the authorizing Debtor, or if this is a Termina	NG THIS AMENDMENT (name of assignor, if this is an	Assignment). If this is an Amendment author e of DEBTOR authorizing this Amendment.	ized by a Debtor which
9. NAME OF SECURED PARTY OF RECORD AUTHORIZI adds collateral or adds the authorizing Debtor, or if this is a Termina 9a. ORGANIZATION'S NAME	NG THIS AMENDMENT (name of assignor, if this is an	Assignment). If this is an Amendment author e of DEBTOR authorizing this Amendment.	zed by a Debtor which
9. NAME OF SECURED PARTY OF RECORD AUTHORIZI adds collateral or adds the authorizing Debtor, or if this is a Termina	NG THIS AMENDMENT (name of assignor, if this is an	Assignment). If this is an Amendment author e of DEBTOR authorizing this Amendment.  MIDDLE NAME	zed by a Debtor which