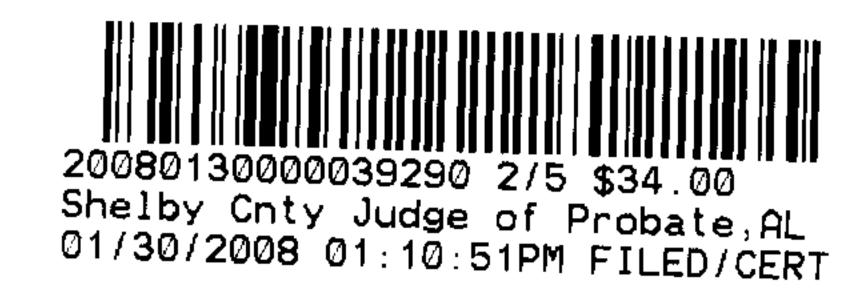
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# 20080130000039290 1/5 \$34.00 Shelby Cnty Judge of Probate, AL 01/30/2008 01:10:51PM FILED/CERT

### UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

| A. NAME & PHONE OF CONTACT AT FILER [optional] Phone:(800) 331-3282 Fax: (818)   | 662-4141                              |                               |   |                        |  |                   |
|--|---------------------------------------|-------------------------------|---|------------------------|--|-------------------|
| B. SEND ACKNOWLEDGEMENT TO: (Name and Address)   | 11467 WACH                            | IOVIA BANK                    |   |                        |  |                   |
| UCC Direct Services  | 132840                                | 14                            |   |                        |  |                   |
| P.O. Box 29071   |                                       |                               |   |                        |  |                   |
| Glendale, CA 91209-9071  | ALAL<br>FIXTUF                        | RE                            |   |                        |  |                   |
| File with: CC AL S   | Shelby, AL                            |                               | THE ABOVE SPA                           | ACE IS FOR F           | ILING OFFICE USE ON                          | ILY               |
| 1. DEBTOR'S EXACT FULL LEGAL NAME - insert only  | one debtor name (1                    | a or 1b) - do not a           |   |                        |  |                   |
| 1a. ORGANIZATION'S NAME GOLDEN CORAL CORPORATION   |                                       |                               |   |                        |  |                   |
| 1b. INDIVIDUAL'S LAST NAME   |                                       | FIRST NAME                    | · · · · · · · · · · · · · · · · · · ·   | MIDDLE                 | NAME   | SUFFIX            |
| 1c. MAILING ADDRESS 5151 GLENWOOD AVENUE   |                                       | CITY<br>RALEIGH               |   | STATE                  | POSTAL CODE 27612                            | COUNTRY           |
|  | F ORGANIZATION  ORATION               | 1f. JURISDICTIO               | N OF ORGANIZATION  NC                   | 1g. ORG                | SANIZATIONAL ID #, if a                      | any               |
| 2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAMI<br>2a. ORGANIZATION'S NAME  | E - insert only o <u>ne</u> d         | lebtor name (2a or            | 2b) - do not abbreviate o               | r combine na           | mes  |                   |
| 2b. INDIVIDUAL'S LAST NAME   | · · · · · · · · · · · · · · · · · · · | FIRST NAME                    |   | MIDDLE                 | NAME   | SUFFIX            |
| 2c. MAILING ADDRESS  |                                       | CITY                          |   | STATE                  | POSTAL CODE                                  | COUNTRY           |
| 2d. <u>SEE INSTRUCTIONS</u> ADD'L INFO RE 2e. TYPE O<br>ORGANIZATION<br>DEBTOR   | FORGANIZATION                         | 2f. JURISDICTIO               | N OF ORGANIZATION                       | 2g. ORG                | SANIZATIONAL ID #, if a                      | ny                |
| 3. SECURED PARTY'S NAME (or NAME of TOTAL ASS<br>3a. ORGANIZATION'S NAME<br>Wachovia Bank, National Association              | SIGNEE of ASSIGNO                     | R S/P) - insert on            | ly o <u>ne</u> secured party nar        | ne (3a or 3b)          |  |                   |
| 3b. INDIVIDUAL'S LAST NAME   | <u> </u>                              | FIRST NAME                    |   | MIDDLE                 | NAME   | SUFFIX            |
| 3c. MAILING ADDRESS<br>P O BOX 2705  | · · · · · · · · · · · · · · · · · · · | CITY<br>WINSTON-              | SALEM                                   | STATE<br>NC            | POSTAL CODE <b>27101</b>                     | COUNTRY           |
| 4. This FINANCING STATEMENT covers the following collateral:   |                                       | <u>i</u>                      | · • · · · · · · · · · · · · · · · · · · |                        | <u>.                                    </u> |                   |
| LAPSED FILING FOR SHELBY COUNTY, ALAB<br>FILE#20030605000350120 DTD 06/05/2003 SI<br>REFERENCE.                              | AMA: FILE#2002<br>EE SCHEDULE A       | 1008000491570<br>AND EXHIBIT  | DTD 10/08/2002 COA=ATTACHED HERE        | OLLATERA<br>ETO AND II | AL ADMEND<br>NCORPORATED I                   | HEREIN BY         |
|  |                                       |                               |   |                        |  |                   |
|  |                                       |                               |   |                        |  |                   |
|  |                                       |                               |   |                        |  |                   |
| Complete only when filing with the Judge of The initial indebtedness secured by this fina                                    |                                       | tie ¢n nn                     |   |                        |  |                   |
| Mortgage tax due (\$.15 per \$100.00 or fract  | tion thereof) \$0.0                   | 00                            |   |                        | \/CO   |                   |
| 5. ALTERNATIVE DESIGNATION [if applicable] LESSEE/LE  6. [x] This FINANCING STATEMENT is to be filed [for record] (continue) |                                       | NEE/CONSIGNOR  7. Check to RE | BAILEE/BAILOR EQUEST SEARCH REPORT      | SELLER/BU              |  | NON-UCC FILING    |
| ESTATE RECORDS. Attach Addendum  3. OPTIONAL FILER REFERENCE DATA  | lif applicab                          | i i                           |   | optional]              | All Debtors                                  | Debtor 1 Debtor 2 |
| 13284014   | 50/29157000                           | 004/1606037 80                | 01 CC 2225000                           | 03919                  |  |                   |



| FINANCING ST<br>FOLLOW INSTRUCTIONS  |   | T ADDENDUM<br>CAREFULLY                |  | Ø1   | /30/2   | 2008 01:10:51PM         | FILED/CERT       |
|--|---|--|--|--|---------|-------------------------|------------------|
| 9. NAME OF FIRST DEBT  | OR (1a or 1b) ON                        | RELATED FINANCING STATEN               | 1ENT   |  |         |                         |                  |
| 9a. ORGANIZATION'S NA GOLDEN CORAL   |   | ON                                     |  |  |         |                         |                  |
| 9b. INDIVIDUAL'S LAST N  | AME                                     | FIRST NAME                             | MIDDLE NAME,SUFFIX   |  |         |                         |                  |
| 10. MISCELLANEOUS  |   |  |  |  |         |                         |                  |
| 13284014-AL-117  |   |  |  |  |         |                         |                  |
| 11467 WACHOVIA I   | BANK                                    |  |  |  |         |                         |                  |
| 50/2915700004/160  |   |  |  |  |         |                         |                  |
| 22250003919  | JUU, UU, UU                             |  |  |  |         |                         |                  |
| 22200000   |   |  |  |  |         |                         |                  |
| File with: CC AL Shelb   | y, AL                                   |  |  | THE ABOVE SDACE  | ie en   | D EU ING GERGE HEE      | ONI V            |
| 11. ADDITIONAL DEBTOR  | R'S EXACT FULL I                        | EGAL NAME - insert only o <u>ne</u> i  | name (11a or 11b) - do not a                               |  |         | R FILING OFFICE USE     | UNLT             |
| 11a. ORGANIZATION'S  |   |  |  |  |         |                         | · -              |
| OR 11b. INDIVIDUAL'S LAS   | Γ NIA MC                                | ······································ | CIDOT MARAE  | ···  | IDDI F  |                         | - Louisely       |
| 1 TO. INDIVIDUAL S LAS   | INAME                                   |  | FIRST NAME   | I <sub>M</sub>   | IDDLE   | NAME                    | SUFFIX           |
| 11c. MAILING ADDRESS   |   |  | CITY   | S  | TATE    | POSTAL CODE             | COUNTRY          |
| 1d. SEE INSTRUCTION  | ADD'L INFO RE<br>ORGANIZATION<br>DEBTOR | 11e. TYPE OF ORGANIZATION              | 11f. JURISDICTION OF ORG                                   | SANIZATION 11  | lg. OR  | GANIZATIONAL ID #, if a | any NOI          |
| 12a. ORGANIZATION'S  |   | or ASSIGNOR S/P's N                    | AME - insert only one name                                 | e (12a or 12b)   |         |                         |                  |
| 12b. INDIVIDUAL'S LAS  | NAME                                    |  | FIRST NAME   | M  | IDDLE   | NAME                    | SUFFIX           |
| 2c. MAILING ADDRESS  | ·                                       |  | CITY   | <u></u>  | TATE    | POSTAL CODE             | COUNTRY          |
|  |   |  |  |  |         | TOOTAL CODE             | COONTIC          |
| 3. This FINANCING STATEM collateral or is filed as a                       |   | nber to be cut or as-extracted         | 16. Additional collateral desc                             | ription:   |         |                         |                  |
| 4. Description of real estate:   | <del></del>                             |  |  |  |         |                         |                  |
| Description: SEE A1  | TACHED EXI                              | -IIRIT "Δ"                             |  |  |         |                         |                  |
| Joodh Paoir. OLL 711   |   |  |  |  | •       |                         |                  |
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|  |   |  |  |  |         |                         |                  |
| <ol><li>Name and address of a RE-<br/>(if Debtor does not have a</li></ol> |   | ove-described real estate              |  |  |         |                         |                  |
|  | •                                       |  | 17. Chook poly if applicable a                             |  |         |                         |                  |
|  |   |  | 17. Check <u>only</u> if applicable a Debtor is a Trust or | nd check <u>only</u> one box.<br>Frustee acting with respect t | o prope | erty held in trust or   | Decedent's Estat |
|  |   |  | 18. Check only if applicable a                             |  |         |                         |                  |
|  |   |  | Debtor is a TRANSMITTI                                     |  |         |                         |                  |
|  |   |  |  | Manufactured-Home Trans  | saction | effective 30 years      |                  |
|  |   |  | [ <b>L</b> ]   |  |         | <del>-</del>            |                  |

Filed in connection with a Public-Finance Transaction -- effective 30 years

| She by Chity Judge of Probat O1/30/2008 01:10:51PM FILED She DACKNOWLEDGMENT TO: (Name and Address)  Jeffrey A. Benson Kilparcick Stockton LLP 3737 Glenwood Avenue, Suite 400 Raleigh, North Carolina 27612  Instructions of the Property of the Stockton LLP 3737 Glenwood Avenue, Suite 400 Raleigh, North Carolina 27612  Instructions of the Property of the Stockton LLP 3738 Glenwood Avenue, Suite 400 Raleigh, North Carolina 27612  Instructions of the Property of the Stockton Control of  |  |  | PST CI   | )S!!!'^ <b>J</b> \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\  | 003   | 06/          | 95/2 <b>90</b> \$ 13:95:2                                  | Pp 1/3 30.00<br>of Probate, AL |
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| Sincipy City 2. Benason, 919.420 1773  SEND ACKNOWLEDOMENT TO: (Name and Address)  Jeffrey A. Benason Kilpatrick Stockton LLP 3737 Clenwood Avenue, Suite 400 Raileigh, North Carolina 27612  Into Laphanetical Stockton LLP 3737 Clenwood Avenue, Suite 400 Raileigh, North Carolina 27612  Into Laphanetical Stockton LLP 3737 Clenwood Avenue, Suite 400 Raileigh, North Carolina 27612  Into Laphanetical Statement Fales  20021008000491570  I C - Z - Z - Z - Z - Z - Z - Z - Z - Z -  |  |  |  | ENT  |   |              |  |                                |
| SEND ACKNOWLEDGMENT TO: (Name and Accress)  Jeffrey A. Benson, 919-420.1173  SEND ACKNOWLEDGMENT TO: (Name and Accress)  Jeffrey A. Benson, 119-57 (Name and Accress)  Jeffrey A. Benson, 119-78-78 (Jeffrey A. Benson)  Rilpatrick Stockton LLP 3737 Giernwood Avenue, Suits 400  Raleigh, North Carolina 27612  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  INTIAL FRANCING STATEMENT FILES  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  INTIAL FRANCING STATEMENT ASSESSMENT ASS | NAME & PHONE OF (  | S (front and bac   | LER lootlone()   | ······································   |   | 200<br>She   |  |                                |
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| Raleigh, North Carolina 27612  THE ABOVE SPACE IS FOR FILING OFFICE USE CMLY  INTINITY PROPERTY OF THE PROPERTY ASSESSMENT INVESTED TO THE PROPERTY ASSESSMENT ASSESS | Kilpanick St   | ockton LLP   |  |  |   |              |  |                                |
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| TERMINATION: Effectiveness of the Financing Statement Identified spows in symmetric of the Secured Party authorizing Statement (CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interestics) of the Secured Party authorizing the Continuation Statement 4 continued for the additional period provided by applicable int.  ASSIGNMENT (Dis or partial): Given remote of easignee in item 7 to 475 and address of statignees in item 7 to 4 and abort given remote of seekgraar in item 9.  AMENDMENT (PARTY INFORMATION): This Amendment affects   Destor or   Secured Party of record. Check only gigs of these two boxes.  Item of the day of the physicing links because grant provides percentages information in items 8 and 97.  CHANGE rappe and for address: Che gurrent record rappe in item 6a or 50; also give filter 7.  CHANGE rappe and or address: Che gurrent record rappe in item 6a or 50; also give filter 7.  CHANGE Rappe and or address: Che gurrent record rappe in item 6a or 50; also give filter 7.  CHANGE Rappe and or address: Che gurrent record rappe in item 6a or 50; also give filter 7.  CHANGE RAPPE RECORD INFORMATION:  (a) DELETE resord. Give record rappe   ADD rappe; Complete stem 7a or 7b, and size.  CURRENT RECORD INFORMATION:  (a) DELETE RAPPE   SUBSECTION   ADDRESS   A | 20021008000491   | 570  | 10-8-200   | ኃ.   |   | (F) 10       | be filed (for record) (or r                                | vecreed) in the                |
| CONTINUATION: Effectiveness of the Francisco Statement is entitled above with respect to security interests) of the Secures Party statemoring the Continuation Statement is continued for the additional period provided by applicable tow.  ASSIGNMENT (PLR or partial): Give name of seeignes in Item 7 as 7 to 17 and address of maniphes in Item 7 at 17 and item 18 and 1 | TERMINATION: EN  | ACTIVITIES Of the F  | Francis Statement Intersified stop   | nd to thurspanist, might talbect to t  | lecurty interests) of the                     | Secured Pr   | My Adherine the Texas                                      | tuitu Slalameet                |
| CHANGED (NEW) OR ADDED INFORMATION:  74. ORGANIZATION'S NAME  75. INDIVIDUAL'S LAST NAME  FIRST NAME  FIRST NAME  SUFFIX  AND IN SOME SIN DEPTE OF ORDANIZATION  FIRST NAME  STATE POSTAL CODE  COUNTRY  AND IN SOME SIN DEPTER  CREANIZATION  CREANIZATION  DEBTOR  MENDMENT (COLLATERAL CHANGE): check only con for.   | AMENDMENT (PARTY AMENDMENT (PARTY AMENDMENT (PARTY AMENDMENT (PARTY AMENDMENT (PARTY AMENDMENT (PARTY AMENDMENT (PARTY) AMENTY AMENDMENT (PARTY) AMENDMENT (PARTY) AMENDMENT ( | INFORMATION  CALIFORNIA PORCE  | N); This Amenament affects  all provide appropriate information  | Debtor of Secured Party of in itemate 8 and/or 7.  | nernet Give record name                       |              | two boxes.  OD name: Complete item                         | 78 or 75 and sles              |
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9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of stations, 8 frix is an Assignment). If this is an Amendment surforted by a Debter which saids collected or adds the suffering Debter, or if this is a Termination authorized by a Debter, climic from or DESTOR authorizing this Amendment.

9. ORGANIZATION'S NAME

Wachovia Bank, National Association

OR So. (HDIVIDUAL'S LAST NAME

FIRST HAME

MIDDLE NAME

10. OPTIONAL FILER REFERENCE DATA

FILING OFFICE COPY — NATIONAL UCC FINANCING STATEMENT AMENDMENT (FORM UCC3) (REV. 07/29/98)

Conf # 13284014

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200801300000039290 4/5 \$34.00 Shelby Cnty Judge of Probate, AL

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# Schedule A to UCC

Schedule A to UCC from Golden Corral Corporation ("Debtor") and for the benefit of Wachovia Bank, National Association ("Secured Party").

Description of Collateral;

ALL OF DEBTOR's right, title and interest in and to the following, whether now existing or hereafter acquired: (i) all fixtures attached to, situate or installed in or upon, or used in the operation or maintenance of, the real property (the Land') known as 101 Cahaba Valley Parkway East, Town of Palham, State of Alabama, in more particularly described in Exhibit A attached hereto and incorporated herein by reference, wherein the record owner is (are) Golden Correction, or any buildings or improvements situated thereon, whether or not such real, personal or mixed property is or shall be affixed to the Land; (ii) all building materials, building machinery and building equipment delivered on site to the Land during the course of, or in connection with, any construction, repair or renovation of the buildings and improvements situated or to be situated thereon; (iii) all leases, licenses or occupancy agreements of all or any part of the Land and all extensions, renewals, and modifications thereof, and any options, rights of first refusal or guarantees relating thereto; all rents, income, revenues, security deposits, issues, profits, awards and payments of any kind payable under the leases or otherwise arising from the Land; (N) all contract right and general intengibles relating to the Land or the use, occupancy, maintenance, construction, repair or operation thereof; all management agreements, franchise agreements, utility agreements and deposits; all maps, plans, surveys and specifications; all warranties and guaranties; all pennils, licenses and approvals; and all insurance policies; and (v) all proceeds of any of the abovedescribed property, whether cash or non-cash, and including insurance proceeds and condemnation awards; and all replacements, substitutions and accessions thereof.

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FUNBATTY MOONSON

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#### EXHIBIT -A-

Lot 2. Gulden Corral's Addition to Palham, as recorded in Map Book 27, page 149, in said Probate Office; together with rights in and to that certain Temporary Grading Eastment as recorded in Instrument 2001/08587 and being more particularly described as follows:

## TEMPORARY GRADING EASHMENT:

A parcel of land situated in part of the Southeast one-quarter of the Northeast one-quarter and part of the Northeast one-quarter of the Southeast one-quarter of section 31, Township 19 South, Range 2 West, Shelby County, Alabama, being more particularly described as follows:

Commance at the Southeast corner of Lot 1, Shelby Madigal Center - Baptist Medical Center Resurvey, as recorded in Map Book 18, page 72 in the Probate Office of Shelby County, Alabama, said point being on the Western most right of way line of Interstate 65 (right of way varies); thence run in a southwesterly direction along the Southern most property line of said Lot 1 for a distance of 289.09 feet; thence turn a deflection angle right 90°00'31° and run in a Northwesterly direction for a distance of 29.19 feet to the point of beginning; thence turn a deflection angle laft 89°58'17° Easternmost right of way of rededicated Cahaba Valley Parkway; thence turn a deflection of way line for a distance of 61.00 feet; thence turn a deflection angle right 88°45'19° and run in a Mortherly direction along said Mastern most right 91°14'41° and run in an Masterly direction for a distance of 273.21 feet; thence turn a deflection angle right 26°20'29° and run in a Southeasterly direction for a distance of 137.44 feet to the point of beginning.

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