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			80229000082930 1	
UCC FINANCING STATEMENT AMENI	<b>MENT</b>	She	lby Cnty Judge of 29/2008 12:27:46	f Probate,AL
FOLLOW INSTRUCTIONS (front and back) CAREFULLY  A. NAME & PHONE OF CONTACT AT FILER [optional]		<b>52</b> ,		
Susan Rixey 205-297-3083				
B. SEND ACKNOWLEDGMENT TO: (Name and Address)				
COMBASS DANIE				
COMPASS BANK 4958 Valleydale Road				
Suite 101				
Hoover, AL 35242-4614				
	THE	ABOVE SPACE IS FO		
1a. INITIAL FINANCING STATEMENT FILE #		to b	s FINANCING STATEMENT be filed [for record] (or record)	
See attached	ified above is terminated with respect to security in		AL ESTATE RECORDS.	on Statement
2. TERMINATION: Effectiveness of the Financing Statement identi				
3. CONTINUATION: Effectiveness of the Financing Statement id continued for the additional period provided by applicable law.	entined above with respect to security interest(s)	of the Secured Faity admi	onzing this continuation of	2,0111011110
4. ASSIGNMENT (full or partial): Give name of assignee in item 7	a or 7b and address of assignee in item 7c; and als	so give name of assignor in	item 9.	
5. AMENDMENT (PARTY INFORMATION): This Amendment afford	ects Debtor or Secured Party of record.	. Check only <u>one</u> of these	two boxes.	
Also check one of the following three boxes and provide appropriate inf		Sive record name	DD name: Complete item 7a	or 7b. and also
CHANGE name and/or address: Give current record name in item of name (if name change) in item 7a or 7b and/or new address (if add			m 7c; also complete items	7d-7g (if applicable)
6. CURRENT RECORD INFORMATION:  6a. ORGANIZATION'S NAME	···		. <u></u>	· · · · · · · · · · · · · · · · · · ·
Eddleman Homes, LLC				
OR 6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
7. CHANGED (NEW) OR ADDED INFORMATION:				
7a. ORGANIZATION'S NAME				
OR 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 ORGANION	ZATION 7f. JURISDICTION OF ORGANIZA	TION 7g. ORG	SANIZATIONAL ID #, if any	<b>—</b>
DEBTOR				NON
8. AMENDMENT (COLLATERAL CHANGE): check only one box.  Describe collateral deleted or added, or give entire rest		Tassinned		
Describe collateral V   deleted of L   added, of give entire L   rest	ated contateral description, or describe conditions.			
(Partial Release)Lot 3, according to The Village a	at Highland Lakes, Regent Neighb	orhood, as recorde	ed in Map Book 37	, Page 130,
in the Office of the Judge of Probate of Shelby C	ounty, Alabama.			
				وروان والمراجع والم والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع و
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING	3 THIS AMENDMENT (name of assignor, if this	is an Assignment). If this is	s an Amendment authorized	by a Debtor which
adds collateral or adds the authorizing Debtor, or if this is a Termination	n authorized by a Debtor, check here and ente	er name of DEBIOR author	orizing this Amendment.	<u>.</u>
9a. ORGANIZATION'S NAME  COMPASS BANK				
OR 9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
10. OPTIONAL FILER REFERENCE DATA	<u>.i</u>			



Compass Bank
P.O. Box 10566
Birmingham, Alabama 35296

20080229000082930 2/2 \$28.00 Shelby Cnty Judge of Probate, AL 02/29/2008 12:27:46PM FILED/CERT

## INITIAL FINANCING STATEMENT FILE #