


		03/07/2008 0	Judge of Probate, AL 9:25:31AM FILED/CERT
JCC FINANCING STATEMENT AMENDMEN			
OLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional]			
Kathy Morgan (205)868-4895			
S. SEND ACKNOWLEDGMENT TO: (Name and Address)			
First Commercial Bank P O Box 11746			
Birmingham, AL 35202			
Dirining and Joe Joe			
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. INITIAL FINANCING STATEMENT FILE #			IG STATEMENT AMENDMENT I
20030731000491780 JOP Shelby Co		to be filed [for REAL ESTATE	record) (or recorded) in the RECORDS.
. TERMINATION: Effectiveness of the Financing Statement identified above is	s terminated with respect to security inte		
. CONTINUATION: Effectiveness of the Financing Statement identified above	ve with respect to security interest(s) o	f the Secured Party authorizing this	Continuation Statement is
continued for the additional period provided by applicable law.			
ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and a	address of assignee in item 7c; and also	give name of assignor in item 9.	
. AMENDMENT (PARTY INFORMATION): This Amendment affects Det	Section 1	Check only one of these two boxes.	
Also check one of the following three boxes and provide appropriate information in it		a managani anggaran Propinsi APSO managan C	
CHANGE name and/or address: Give current record name in item 6a or 6b; also name (if name change) in item 7a or 7b and/or new address (if address change)	o give new DELETE name: Give in item 7c. Lo be deleted in item	e record name: ADD name: C 6a or 6bitem 7c; also	Complete item 7a or 7b, and also complete items 7d-7g (if applicab
CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME	······································		
Daniel Realty Company			
R 6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
. CHANGED (NEW) OR ADDED INFORMATION:			
7a. ORGANIZATION'S NAME			
R 75. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
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. MAILING ADDRESS	CITY	STATE POSTAL	CODE COUNTRY
ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION	7f. JURISDICTION OF ORGANIZATI		
ADD'L INFO RE 7e. TYPE OF ORGANIZATION			IAL ID#, if any
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