


_	C FINANCING STATEMENT A MENDMEN		helby Cnty Judge 3/19/2008 01:02:5	SPM FILED/CERT
OLL	OW INSTRUCTIONS (front and back) CAREFULLY IAME & PHONE OF CONTACT AT FILER [optional]			
	END ACKNOWLEDGMENT TO: (Name and Address)			
·. •				
	Meade Whitaker, Jr. Bradley Arant Rose & White LLP			
	1819 Fifth Avenue North			
	Birmingham, AL 35203			
	i			
	<u> </u>	THE ABOVE S	SPACE IS FOR FILING	OFFICE USE ONLY
	VITIAL FINANCING STATEMENT FILE #			G STATEMENT AMENDMENT ecord] (or recorded) in the
	995-34727		REAL ESTATE	RECORDS.
	TERMINATION: Effectiveness of the Financing Statement identified above is			
L	CONTINUATION: Effectiveness of the Financing Statement identified above continued for the additional period provided by applicable law.	ve with respect to security interest(s) of the Secu	red Party authorizing this C	Jontinuation Statement is
T	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.	
<u> </u>	MENDMENT (PARTY INFORMATION): This Amendment affects Del			
	Iso check one of the following three boxes and provide appropriate information in it			
	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)	DELETE name: Give record not be deleted in item 6a or 6b.		omplete item 7a or 7b, and also omplete items 7d-7g (if applicat
	URRENT RECORD INFORMATION:			
	6a. ORGANIZATION'S NAME			
٦	6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
	Cook	A.	Philip	Jr.
	HANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME			
	7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
c. N	MAILING ADDRESS	CITY	STATE POSTAL C	COUNTRY
				A1 10 # if a au
	ADD'I INFO RE 7e TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7a. ORGANIZATION	ALID #, ILANY
	ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATION.	<u></u>
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N ac	ORGANIZATION DEBTOR MENDMENT (COLLATERAL CHANGE): check only one box. escribe collateral deleted or added, or give entire restated collaters IAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AME dds collateral or adds the authorizing Debtor, or if this is a Termination authorized 9a. ORGANIZATION'S NAME Regions Bank, successor-by-merger to AmSouth Bank	al description, or describe collateral assigned assignment and assignor, if this is an Assign by a Debtor, check here and enter name of Described and enter name of Description.	ed. If this is an Amenda DEBTOR authorizing this A	nent authorized by a Debtor whimendment.