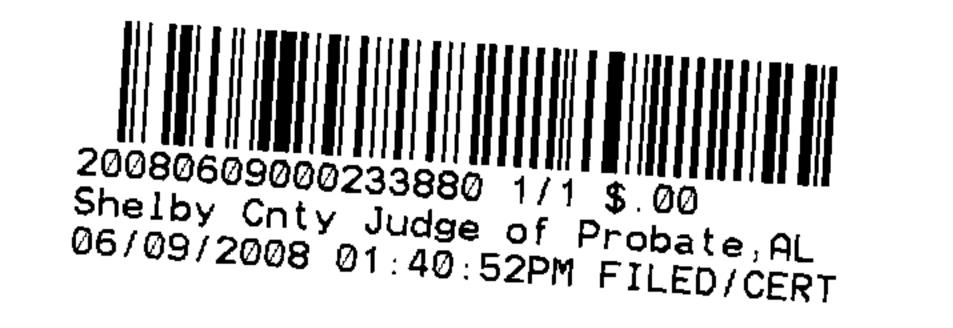
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## UCC FINANCING STATEMENT AMENDMENT

OLLOW INSTRUCTIONS (front and back) CAREF	TULL T			
A. NAME & PHONE OF CONTACT AT FILER [option				
CSC Diligenz, Inc. 1-800-858-52	94			
B. SEND ACKNOWLEDGMENT TO: (Name and A	ddress)			
34705838				
CSC Diligenz, Inc.				
6500 Harbour Heights Pkwy,	Suite 400			
Mukilteo, WA 98275	Suite 400			
WICKITEO, VVA 30213				
	Filed In: Alabama Shelby			
		THE ABOVE SPACE	EIS FOR FILING OFF	ICE USE ONLY
1a. INITIAL FINANCING STATEMENT FILE # 2001-51663 11/29/01			Ib. This FINANCING STA to be filed [for record REAL ESTATE RECORD	
TERMINATION: Effectiveness of the Financing S	tatement identified above is terminated with resp	ect to security interest(s) of the Sec		• • • • • • • • • • • • • • • • • • • •
CONTINUATION: Effectiveness of the Financing	Statement identified above with respect to see			
continued for the additional period provided by appli	cable law.	· —•··		
ASSIGNMENT (full or partial): Give name of assignment	gnee in item 7a or 7b and address of assignee in	item 7c; and also give name of ass	signor in item 9.	
. AMENDMENT (PARTY INFORMATION): This A	mendment affects Debtor <u>or</u> Secured	Party of record. Check only one	of these two boxes.	
Also check <u>one</u> of the following three boxes <u>and</u> provide a		<b>.</b>		<b>_</b>
CHANGE name and/or address: Please refer to the detail in regards to changing the name/address of a party.	led instructions DELETE name: to be deleted in	Give record name item 6a or 6b.	ADD name: Complete ite also complete items 7e-7	em 7a or 7b, and also item 7c; 'g (if applicable).
CURRENT RECORD INFORMATION:				
6a. ORGANIZATION'S NAME				
OR 66. INDIVIDUAL'S LAST NAME	FIRST NAME		AND TO LET NUMBER	lou (EE)
PETELOS	TERESA	F	MIDDLE NAME SUFFIX	
	IERESA		В	
7a. ORGANIZATION'S NAME	· · · · · · · · · · · · · · · · · · ·			
TAL ON CONTROL OF TAXABLE				
7b. INDIVIDUAL'S LAST NAME	FIRST NAME	······································	MIDDLE NAME	SUFFIX
PETELOS	TONY			
c. MAILING ADDRESS	CITY	<u> </u>	STATE POSTAL CODE	COUNTRY
5178 SAPPHIRE RDG	HOOVER		AL 3524441	73 USA
	OF ORGANIZATION 7f. JURISDICTION	OF ORGANIZATION 1	g. ORGANIZATIONAL ID	#, if any
ORGANIZATION DEBTOR				ZNON
. AMENDMENT (COLLATERAL CHANGE): check				INON
Describe collateral deleted or added, or give		cribe collateral assigned.		
. NAME OF SECURED PARTY OF RECORD AU adds collateral or adds the authorizing Debtor, or if this is 9a. ORGANIZATION'S NAME  AmSouth Bank N/K/A REGIONS	THORIZING THIS AMENDMENT (name of a Termination authorized by a Debtor, check he	assignor, if this is an Assignment). re and enter name of DEBTO	R authorizing this Amendr	uthorized by a Debtor which ment.
NAME OF SECURED PARTY OF RECORD AU adds collateral or adds the authorizing Debtor, or if this is 9a. ORGANIZATION'S NAME AmSouth Bank N/K/A REGIONS	THORIZING THIS AMENDMENT (name of a Termination authorized by a Debtor, check he	assignor, if this is an Assignment). re and enter name of DEBTO	If this is an Amendment a R authorizing this Amendr	uthorized by a Debtor which ment.
NAME OF SECURED PARTY OF RECORD AU adds collateral or adds the authorizing Debtor, or if this is 9a. ORGANIZATION'S NAME  AmSouth Bank N/K/A REGIONS	THORIZING THIS AMENDMENT (name of a Termination authorized by a Debtor, check he	assignor, if this is an Assignment). re and enter name of DEBTO	R authorizing this Amendr	nent.