UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional]					20081107000433880 1/2 \$36.2			
	NAME & PHONE OF CO T CARVER 205-221-411		:R [optional]		Shelby Cnty Judge of Probate; 11/07/2008 02:18:32PM FILED/C			
B. 5	SEND ACKNOWLEDGN	MENT TO: (Name	e and Address)					
	DININIA CLE DANIK							
	'PINNACLE BANK 1811 SECOND AVE	ENUE						
	JASPER, AL 3550	1						
	<u></u>			T	HE ABOVE SPACE IS	FOR FILING OFFICE	E USE ONL	
1. D			- insert only <u>one</u> debtor n	ame (1a or 1b) - do not abbrevia	ate or combine name	es		
	1a. ORGANIZATION'S NA	AME						
OR	1Ь. INDIVIDUAL'S LAST NAME			FIRST NAME	MIE	MIDDLE NAME		
	WALDROP			l _R	w			
	WALDROP							
1c. N	MAILING ADDRESS			CITY	STA			
1c. N	MAILING ADDRESS 3 CHANDLAR COURT	ADD'L INFO BE	1a. TYPE OF ORGANIZATION	PELHAM	AL	35124	#. if anv	
1c. N	MAILING ADDRESS	ORGANIZATION	1e. TYPE OF ORGANIZATION	PELHAM	AL		#, if any	
1c. N 2003 1d.	MAILING ADDRESS 3 CHANDLAR COURT TAX ID #: SSN OR EIN	ORGANIZATION DEBTOR		PELHAM 1f. JURISDICTION OF ORGANIX	AL ZATION 1g.	35124 ORGANIZATIONAL ID	#, if any	
1c. N	MAILING ADDRESS 3 CHANDLAR COURT TAX ID #: SSN OR EIN DDITIONAL DEBTOR' 2a. ORGANIZATION'S NA	ORGANIZATION DEBTOR 'S EXACT FULL		PELHAM	AL ZATION 1g.	35124 ORGANIZATIONAL ID	#, if any	
1c. N 2003 1d.	MAILING ADDRESS 3 CHANDLAR COURT TAX ID #: SSN OR EIN DDITIONAL DEBTOR' 2a. ORGANIZATION'S NA 2b. INDIVIDUAL'S LAST	ORGANIZATION DEBTOR S EXACT FULL AME		PELHAM 1f. JURISDICTION OF ORGANIZ one debtor name (2a or 2b) - d FIRST NAME	ALZATION 1g.	35124 ORGANIZATIONAL ID	#, if any	
1c. No. 1	MAILING ADDRESS 3 CHANDLAR COURT TAX ID #: SSN OR EIN DDITIONAL DEBTOR' 2a. ORGANIZATION'S NA 2b. INDIVIDUAL'S LAST WALDROP	ORGANIZATION DEBTOR S EXACT FULL AME		PELHAM 1f. JURISDICTION OF ORGANIZ one debtor name (2a or 2b) - d FIRST NAME DRUCILLA	ZATION 1g. o not abbreviate or MIE	35124 ORGANIZATIONAL ID combine names DDLE NAME	#, if any	
1c. No. 1d. 1d. 2c. No. 2c. No	MAILING ADDRESS 3 CHANDLAR COURT TAX ID #: SSN OR EIN DDITIONAL DEBTOR' 2a. ORGANIZATION'S NA 2b. INDIVIDUAL'S LAST WALDROP MAILING ADDRESS	ORGANIZATION DEBTOR S EXACT FULL AME		PELHAM 1f. JURISDICTION OF ORGANIZ one debtor name (2a or 2b) - d FIRST NAME DRUCILLA CITY	ZATION 1g. o not abbreviate or MIC	35124 ORGANIZATIONAL ID combine names ODLE NAME ATE POSTAL CODE	#, if any	
1c. No. 200	MAILING ADDRESS 3 CHANDLAR COURT TAX ID #: SSN OR EIN DDITIONAL DEBTOR' 2a. ORGANIZATION'S NA 2b. INDIVIDUAL'S LAST WALDROP	ORGANIZATION DEBTOR 'S EXACT FULL AME NAME ADD'L INFO RE		PELHAM 1f. JURISDICTION OF ORGANIZ one debtor name (2a or 2b) - d FIRST NAME DRUCILLA CITY PELHAM	ALZATION 1g. o not abbreviate or MIC	35124 ORGANIZATIONAL ID combine names ODLE NAME ATE POSTAL CODE		
1c. No. 200	MAILING ADDRESS 3 CHANDLAR COURT TAX ID #: SSN OR EIN 2a. ORGANIZATION'S NA 2b. INDIVIDUAL'S LAST I WALDROP MAILING ADDRESS 03 CHANDLAR COURT	ORGANIZATION DEBTOR 'S EXACT FULL AME NAME	LEGAL NAME - insert only	PELHAM 1f. JURISDICTION OF ORGANIZ one debtor name (2a or 2b) - d FIRST NAME DRUCILLA CITY PELHAM	ALZATION 1g. o not abbreviate or MIC	35124 Combine names DDLE NAME ATE POSTAL CODE 35124		
1c. No. 200.	MAILING ADDRESS 3 CHANDLAR COURT TAX ID #: SSN OR EIN ADDITIONAL DEBTOR' 2a. ORGANIZATION'S NA 2b. INDIVIDUAL'S LAST WALDROP MAILING ADDRESS 03 CHANDLAR COURT TAX ID #: SSN OR EIN SECURED PARTY'S IN SECURED PARTY'S IN COURT	ORGANIZATION DEBTOR AME ADD'L INFO RE ORGANIZATION DEBTOR NAME (or NAME or	LEGAL NAME - insert only 2e. TYPE OF ORGANIZATION	PELHAM 1f. JURISDICTION OF ORGANIZ one debtor name (2a or 2b) - d FIRST NAME DRUCILLA CITY PELHAM	ALZATION 1g. MIE T STA ALZATION 2g.	35124 Combine names ODLE NAME ATE POSTAL CODE 35124		
1c. No. 200.	MAILING ADDRESS 3 CHANDLAR COURT TAX ID #: SSN OR EIN ADDITIONAL DEBTOR' 2a. ORGANIZATION'S NA 2b. INDIVIDUAL'S LAST I WALDROP MAILING ADDRESS 03 CHANDLAR COURT TAX ID #: SSN OR EIN SECURED PARTY'S I 3a. ORGANIZATION'S NA	ORGANIZATION DEBTOR ADD'L INFO RE ORGANIZATION DEBTOR NAME (or NAME of MAME)	LEGAL NAME - insert only 2e. TYPE OF ORGANIZATION	PELHAM 1f. JURISDICTION OF ORGANIZ 7 one debtor name (2a or 2b) - d FIRST NAME DRUCILLA CITY PELHAM 2f. JURISDICTION OF ORGANIZ	ALZATION 1g. MIE T STA ALZATION 2g.	35124 Combine names ODLE NAME ATE POSTAL CODE 35124		
1c. No. 200.	MAILING ADDRESS 3 CHANDLAR COURT TAX ID #: SSN OR EIN ADDITIONAL DEBTOR' 2a. ORGANIZATION'S NA 2b. INDIVIDUAL'S LAST I WALDROP MAILING ADDRESS 03 CHANDLAR COURT TAX ID #: SSN OR EIN SECURED PARTY'S NA PINNACI F BANK VEST	ORGANIZATION DEBTOR ADD'L INFO RE ORGANIZATION DEBTOR NAME (or NAME of NAME of NAME of NAME)	LEGAL NAME - insert only 2e. TYPE OF ORGANIZATION	PELHAM 1f. JURISDICTION OF ORGANIZ 7 one debtor name (2a or 2b) - d FIRST NAME DRUCILLA CITY PELHAM 2f. JURISDICTION OF ORGANIZ	ALZATION 1g. MIE T STA ALZATION 2g.	35124 Combine names ODLE NAME ATE POSTAL CODE 35124		
1c. No. 1200 2c. No. 2c. No. 2	MAILING ADDRESS 3 CHANDLAR COURT TAX ID #: SSN OR EIN ADDITIONAL DEBTOR' 2a. ORGANIZATION'S NA 2b. INDIVIDUAL'S LAST WALDROP MAILING ADDRESS 03 CHANDLAR COURT TAX ID #: SSN OR EIN SECURED PARTY'S NA PINNACLE BANK, VES	ORGANIZATION DEBTOR ADD'L INFO RE ORGANIZATION DEBTOR NAME (or NAME of NAME of NAME of NAME)	LEGAL NAME - insert only 2e. TYPE OF ORGANIZATION	PELHAM 1f. JURISDICTION OF ORGANIZA one debtor name (2a or 2b) - description FIRST NAME DRUCILLA CITY PELHAM 2f. JURISDICTION OF ORGANIZA OR S/P) - insert only one secured party	ALZATION 1g. MIE T STA ALZATION 2g.	35124 Combine names ODLE NAME ATE POSTAL CODE 35124 ORGANIZATIONAL ID		
1c. No. 1200 2c. No. 2c. No. 2	MAILING ADDRESS 3 CHANDLAR COURT TAX ID #: SSN OR EIN ADDITIONAL DEBTOR' 2a. ORGANIZATION'S NA 2b. INDIVIDUAL'S LAST WALDROP MAILING ADDRESS 03 CHANDLAR COURT TAX ID #: SSN OR EIN SECURED PARTY'S NA PINNACLE BANK, VES	ORGANIZATION DEBTOR ADD'L INFO RE ORGANIZATION DEBTOR NAME (or NAME of NAME of NAME of NAME)	LEGAL NAME - insert only 2e. TYPE OF ORGANIZATION	PELHAM 1f. JURISDICTION OF ORGANIZA one debtor name (2a or 2b) - description FIRST NAME DRUCILLA CITY PELHAM 2f. JURISDICTION OF ORGANIZA OR S/P) - insert only one secured party	ALZATION 1g. MIE T STA ALZATION 2g.	ORGANIZATIONAL ID COMBINE NAME ATE POSTAL CODE 35124 ORGANIZATIONAL ID ODLE NAME		
1c. No. 10. 10. 10. 10. 10. 10. 10. 10. 10. 10	MAILING ADDRESS 3 CHANDLAR COURT TAX ID #: SSN OR EIN ADDITIONAL DEBTOR' 2a. ORGANIZATION'S NA 2b. INDIVIDUAL'S LAST WALDROP MAILING ADDRESS 03 CHANDLAR COURT TAX ID #: SSN OR EIN SECURED PARTY'S IN 3a. ORGANIZATION'S NA PINNACLE BANK, VES 3b. INDIVIDUAL'S LAST	ORGANIZATION DEBTOR ADD'L INFO RE ORGANIZATION DEBTOR NAME (or NAME of NAME of NAME of NAME)	LEGAL NAME - insert only 2e. TYPE OF ORGANIZATION	PELHAM 1f. JURISDICTION OF ORGANIZ 7 one debtor name (2a or 2b) - d FIRST NAME DRUCILLA CITY PELHAM 2f. JURISDICTION OF ORGANIZ OR S/P) - insert only one secured party FIRST NAME	ALZATION 1g. O not abbreviate or STA ALZATION 2g. Viname (3a or 3b)	ORGANIZATIONAL ID Combine names ODLE NAME ORGANIZATIONAL ID ODLE NAME ODLE NAME ODLE NAME ODLE NAME		
20. None 20.	MAILING ADDRESS 3 CHANDLAR COURT TAX ID #: SSN OR EIN ADDITIONAL DEBTOR' 2a. ORGANIZATION'S NA 2b. INDIVIDUAL'S LAST I WALDROP MAILING ADDRESS 03 CHANDLAR COURT TAX ID #: SSN OR EIN SECURED PARTY'S I 3a. ORGANIZATION'S NA PINNACLE BANK, VES 3b. INDIVIDUAL'S LAST II MAILING ADDRESS	ORGANIZATION DEBTOR 'S EXACT FULL AME ADD'L INFO RE ORGANIZATION DEBTOR NAME (or NAME or NAME) TAVIA OFFICE NAME	LEGAL NAME - insert only 2e. TYPE OF ORGANIZATION f TOTAL ASSIGNEE of ASSIGN	PELHAM 1f. JURISDICTION OF ORGANIZA 7 one debtor name (2a or 2b) - description FIRST NAME DRUCILLA CITY PELHAM 2f. JURISDICTION OF ORGANIZA OR S/P) - insert only one secured party FIRST NAME CITY CITY CITY	ALZATION 1g. o not abbreviate or MIE T STA ALZATION 2g. name (3a or 3b) MIE STA	ORGANIZATIONAL ID Combine names ODLE NAME ORGANIZATIONAL ID ODLE NAME ODLE NAME ODLE NAME ODLE NAME		
1c. No. 12c. No. 2c. N	MAILING ADDRESS 3 CHANDLAR COURT TAX ID #: SSN OR EIN ADDITIONAL DEBTOR' 2a. ORGANIZATION'S NA 2b. INDIVIDUAL'S LAST I WALDROP MAILING ADDRESS 33 CHANDLAR COURT TAX ID #: SSN OR EIN SECURED PARTY'S I 3a. ORGANIZATION'S NA PINNACLE BANK, VES 3b. INDIVIDUAL'S LAST II MAILING ADDRESS 39 CANYON ROAD This FINANCING STATEMENT THE COLLATERAL SHALL	ORGANIZATION DEBTOR 'S EXACT FULL AME NAME ADD'L INFO RE ORGANIZATION DEBTOR NAME (or NAME of NAME) TAVIA OFFICE NAME NAME TOVERS THE FOLION L CONSIST OF AL	LEGAL NAME - insert only 2e. TYPE OF ORGANIZATION f TOTAL ASSIGNEE of ASSIGN wing collateral: L OF THE FOLLOWING DESC	PELHAM 1f. JURISDICTION OF ORGANIZA 7 one debtor name (2a or 2b) - description FIRST NAME DRUCILLA CITY PELHAM 2f. JURISDICTION OF ORGANIZA OR S/P) - insert only one secured party FIRST NAME CITY CITY CITY	ALZATION 1g. O not abbreviate or a STA ALZATION 2g. Viname (3a or 3b) MICHAEL STA ALZATION ST	35124 COMBINE NAME ATE POSTAL CODE 35124 ORGANIZATIONAL ID ODLE NAME ATE POSTAL CODE 35124 ORGANIZATIONAL ID ATE POSTAL CODE 35216	, if any	

LESSEE/LESSOR 🗆 CONSIGNEE/CONSIGNOR 🗆 BAILEE/BAILOR 🗀 SELLER/BUYER 🗀 AG. LIEN

7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE] [optional]

Bankers Systems, Inc., St. Cloud, MN Form UCC-1-LAZ 5/30/2001

NON-UCC FILING

All Debtors Debtor 1 Debtor 2

6. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. Attach Addendum [if applicable]

5. ALTERNATIVE DESIGNATION [if applicable]:

8. OPTIONAL FILER REFERENCE DATA

UCC FINANCING STATES FOLLOW INSTRUCTIONS (front and ba			20081107000433880 2/2 \$36.25				
9. NAME OF FIRST DEBTOR (1a or 1b)	ON RELATED FINANCING S		She	lby Cnty Judge (07/2008 02:18:3)	of Probate,AL		
9a. ORGANIZATION'S NAME				117	0772000 02.10.0	ZI II I ILLDI OLIVI	
OR 9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME,SU	JEFIX				
WALDROP	R	W					
0. MISCELLANEOUS:							
			THE AD	OVE QDACE	IS FOR FILING OFFIC	SE LIGE ONL V	
11. ADDITIONAL DEBTOR'S EXACT	FULL LEGAL NAME - insert o	nly one name (11a or 11b)				JE OUE OILE	
11a. ORGANIZATION'S NAME						· · · · · · · · · · · · · · · · · · ·	
OR 116. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE	NAME	SUFFIX	
<u> </u>							
11c. MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY	
11d. TAX ID #: SSN OR EIN ADD'L INFO F	RE 11e. TYPE OF ORGANIZATIO	N 116 JURISDICTION OF	ORGANIZATION	110 OR	SANIZATIONAL ID # if:	201/	
ORGANIZATIO	1	i ji ii. somsbic iiola or	11f. JURISDICTION OF ORGANIZATION		11g. ORGANIZATIONAL ID #, if any		
DEBTOR 12. ADDITIONAL SECURED PAR	RTY'S or ASSIGNOR	S/P'S NAME - insert on	v one name /12a	or 12h)		LXI NONI	
12. ADDITIONAL SECURED PAID 12a. ORGANIZATION'S NAME	THE DIE CONTROL	O/I O NAME - Miser Off	y <u>one</u> name (12a	01 1207			
OR 12b. INDIVIDUAL'S LAST NAME	·	FIRST NAME	FIRST NAME		MIDDLE NAME		
12c. MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY	
		1.6.					
13. This FINANCING STATEMENT covers	نــــا	acted 16. Additional collateral	description:				
collateral, or is filed as a fixture filing filed. 14. Description of real estate:	ıg.						
DWELLING WHOSE ADDRESS IS LISTED	AS: 2003 CHANDLAR COURT.						
PELHAM, ALABAMA	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
Lot 34 according to talar Townhomes, First recorded in map book 2 in the probate office Alabama.	Addition, as 24, page 18,						
15. Name and address of a RECORD OWNER (if Debtor does not have a record interes RW WALDROP		17. Check only if applic	able and check <u>only</u> c	one box.			
		Debtor is a Trust or	Trustee acting w	ith respect to p	roperty held in trust or	Decedent's Estate	

18. Check only if applicable and check only one box.

Filed in connection with a Manufactured-Home Transaction -- effective 30 years

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

Debtor is a TRANSMITTING UTILITY