



FOLLOW INSTRUCTIONS (front and back) CAREFULLY			
A. NAME & PHONE OF CONTACT AT FILER [optional]			
Cathy Padgett: 297-4293 B. SEND ACKNOWLEDGMENT TO: (Name and Address)	·		
T			
Compass Bank			
4958 Valleydale Road, Suite 101			
Birmingham, AL 35242			
	THE	ABOVE SPACE IS FOR FILING OFFICE U	
a. INITIAL FINANCING STATEMENT FILE # 20060925000475080 and corrected in 200611140	00556650	1b. This FINANCING STATEMITED to be filed [for record] (or record). REAL ESTATE RECORDS.	corded) in the
2. TERMINATION: Effectiveness of the Financing Statement identified	above is terminated with respect to security inte		
3. CONTINUATION: Effectiveness of the Financing Statement identicent continued for the additional period provided by applicable law.	ified above with respect to security interest(s) o	f the Secured Party authorizing this Continuation	Statement is
ASSIGNMENT (full or partial): Give name of assignee in item 7a or	7b and address of assignee in item 7c; and also	give name of assignor in item 9.	
5. AMENDMENT (PARTY INFORMATION): This Amendment affects	II	Check only <u>one</u> of these two boxes.	
Also check one of the following three boxes and provide appropriate information CHANGE came and/or address: Give current record name in item 6s of		o record name - FT ADD name: Complete item	. To or The and also
CHANGE name and/or address: Give current record name in item 6a o name (if name change) in item 7a or 7b and/or new address (if address	or 6b; also give new DELETE name: Give change) in item 7c. To be deleted in item	· · · · · · · · · · · · · · · · · · ·	n 7a or 7b, and also ns 7d-7g (if applicable)
CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME	· · · · · · · · · · · · · · · · · · ·	······································	
Thornton Construction Co., Inc. and Holland Lak	ces, Inc.		
6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
. CHANGED (NEW) OR ADDED INFORMATION:			!
7a. ORGANIZATION'S NAME			
7b. INDIVIDUAL'S LAST NAME	Terresone 1 a 1 a 2		
I D. INDIVIDOAL S LAST INAINE	FIRST NAME	MIDDLE NAME	SUFFIX
c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
o. Within the Fibertage		JOINIE I COINE CODE	OOM III.
d. TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATI	ION 7f. JURISDICTION OF ORGANIZATI	ON 7g. ORGANIZATIONAL ID #, if an	l y
ORGANIZATION	}		_
ORGANIZATION DEBTOR		· · · · · · · · · · · · · · · · · · ·	NONE
ORGANIZATION DEBTOR 3. AMENDMENT (COLLATERAL CHANGE): check only one box.			NONE
ORGANIZATION DEBTOR	collateral description, or describe collateral	assigned.	NONE
ORGANIZATION DEBTOR 3. AMENDMENT (COLLATERAL CHANGE): check only one box. Describe collateral deleted or added, or give entire restated			
ORGANIZATION DEBTOR 3. AMENDMENT (COLLATERAL CHANGE): check only one box.	livision plat of Holland Lakes, So	ector 3, as recorded in Map Book	
ORGANIZATION DEBTOR 3. AMENDMENT (COLLATERAL CHANGE): check only one box. Describe collateral deleted or added, or give entire restated Partial Release: Lot 178, according to the final subdential restated	livision plat of Holland Lakes, So	ector 3, as recorded in Map Book	
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