



A. NAME & PHONE OF CONTACT AT FILER [optional]			
Ann Moore			
B. SEND ACKNOWLEDGMENT TO: (Name and Address)			
Compass Bank			
4958 Valleydale Road			
Suite 101			
Birmingham, AL 35242			
	THE ABOVE	SPACE IS FOR FILING OFFICE U	SE ONLY
a. INITIAL FINANCING STATEMENT FILE #		1b. This FINANCING STATEME	NT AMENDMENT I
20061229000637700, 20061229000637720 & 2006	51229000637740	to be filed [for record] (or re REAL ESTATE RECORDS.	-
TERMINATION: Effectiveness of the Financing Statement identified at	bove is terminated with respect to security interest(s) o	f the Secured Party authorizing this Termin	nation Statement.
CONTINUATION: Effectiveness of the Financing Statement identifie continued for the additional period provided by applicable law.	d above with respect to security interest(s) of the Se	cured 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 na	me of assignor in item 9.	
. AMENDMENT (PARTY INFORMATION): This Amendment affects	Debtor or Secured Party of record. Check o	nly <u>one</u> of these two boxes.	
Also check one of the following three boxes and provide appropriate information			
CHANGE name and/or address: Give current record name in item 6a or 6 name (if name change) in item 7a or 7b and/or new address (if address change)	b; also give new DELETE name: Give record to be deleted in item 6a or 6		n 7a or 7b, and also ns 7d-7g (if applicab
. CURRENT RECORD INFORMATION:			
6a. ORGANIZATION'S NAME	. • .		
The Village at Highland Lakes Improvement Dist		[AMDDLE MANE	T
6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
		STATE POSTAL CODE	COUNTRY
c. MAILING ADDRÉSS	CITY		
		7g. ORGANIZATIONAL ID #, if ar	ıy \tag{\textsq} \text{NO}
d. TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR DEBTOR One box.	N 7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if ar	
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