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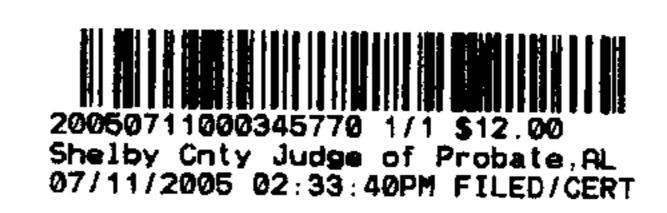
	STATEMENT				
	(front and back) CAREFULLY NTACT AT FILER [optional]		2009111 Shelby	8000428550 1/3 Cnty Judge of P	37.35
Janice Ruffin (205			11/18/2	2009 09:52:40 AM	ropate, AL FILED/CERT
	ENT TO: (Name and Address)	<u></u>			. 1000 OCK
 					
ALABAMA P	OWER COMPANY				
600 N. 18 TH					
BIRMINGHA	M, AL 35291				
<u>i</u>		THE ABOVE	SPACE IS FO	R FILING OFFICE US	E ONLY
DEBTOR'S EXACT FUL	L LEGAL NAME - insert only one debtor name (1a	or 1b) - do not abbreviate or combine names			<u>-</u>
1a. ORGANIZATION'S NAM	E				
16. INDIVIDUAL'S LAST NA	ME ,	FIRST NAME	MIDDLE	NAME	SUFFIX
The	masan	Philip			
MAILING ADDRESS	1 1	CITY	STATE	POSTAL CODE	COUNTRY
1421	Mirlan Ct	Helena	AL	35080	US
TAX ID #: SSN OR EIN	ADD'L INFO RE 1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION	1g. ORG	ANIZATIONAL ID #, if any	· · · · · · · · · · · · · · · · · · ·
	ORGANIZATION ' ' DEBTOR				, NC
	S EXACT FULL LEGAL NAME - insert only one d	debtor name (2a or 2b) - do not abbreviate or con	nbine names	·—···	· · · · - ·
2a. ORGANIZATION'S NAM	!E				-
2b. INDIVIDUAL'S LAST NA	ME	FIRST NAME	MIDDLE	NAME	SUFFIX
Them	· · ·	Melanie			
. MAILING ADDRESS	<u></u>	CITY	STATE	POSTAL CODE	COUNTRY
Jar	ve		AL		US
I. TAX ID #: SSN OR EIN	ADD'L INFO RE 2e. TYPE OF ORGANIZATION ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORG	ANIZATIONAL ID #, if any	
	DEBTOR		1		NO
SECURED PARTY'S	NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR	R S/P) - insert only <u>one</u> secured party name (3a o	r 3b)		
3a. ORGANIZATION'S NAN					
p L	WER COMPANY	TELECOT MANAGE	IMIDDLE	NI A S A E	SUFFIX
3b. INDIVIDUAL'S LAST NA	/M⊏	FIRST NAME	MIDDEE	INAIVIC.	30111
. MAILING ADDRESS	 	CITY	STATE	POSTAL CODE	COUNTRY
500 N. 18TH STREE	ZT	BIRMINGHAM	AL	35291	US
/00 14. 10 111 D1 XX	IT covers the following collateral:		<u> </u>		

6. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [If applicable] [ADDITIONAL FEE] [optional]

All Debtors Debtor 1

8. OPTIONAL FILER REFERENCE DATA

9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT 9. ORGANIZATION'S NAME OR 9. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (11a or 11b) - do not abbreviate or combine names 11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (11a or 11b) - do not abbreviate or combine names 11a. ORGANIZATION'S NAME OR 11b. INDIVIDUAL'S LAST NAME FIRST NAME FIRST NAME FIRST NAME MIDDLE NAME - SUFFIX MIDDLE NAME - SUFFIX STATE POSTAL CODE COUNTIL 11d. TAX ID #: SSN OR EIN ADDILINFO RE ORGANIZATION 11f. JURISDICTION OF ORGANIZATION 11g. ORGANIZATIONAL ID #, if any	CC FINANCING OLLOW INSTRUCTIONS		ENTADDENDU CAREFULLY	M				
Sequency List as the property of the property	9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT							
INSCELLANEOUS: ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - Insert only one name (11s or 11b) - do not abbreviate or combine names THE ABOVE SPACE IS FOR FILING OFFICE USE ONL 11/1/8/2009 99:52:43 RF FILED/CE THE ABOVE SPACE IS FOR FILING OFFICE USE ONL 11/1/8/2009 99:52:43 RF FILED/CE THE ABOVE SPACE IS FOR FILING OFFICE USE ONL 11/1/8/2009 99:52:43 RF FILED/CE THE ABOVE SPACE IS FOR FILING OFFICE USE ONL 11/1/8/2009 99:52:43 RF FILED/CE THE ABOVE SPACE IS FOR FILING OFFICE USE ONL 11/1/8/2009 99:52:43 RF FILED/CE THE ABOVE SPACE IS FOR FILING OFFICE USE ONL 11/1/8/2009 99:52:43 RF FILED/CE THE ABOVE SPACE IS FOR FILING OFFICE USE ONL 11/1/8/2009 99:52:43 RF FILED/CE THE ABOVE SPACE IS FOR FILING OFFICE USE ONL 11/1/8/2009 99:52:43 RF FILED/CE THE ABOVE SPACE IS FOR FILING OFFICE USE ONL 11/1/8/2009 99:52:43 RF FILED/CE THE ABOVE SPACE IS FOR FILING OFFICE USE ONL 11/1/8/2009 99:52:43 RF FILED/CE THE ABOVE SPACE IS FOR FILING OFFICE USE ONL 11/1/8/2009 99:52:43 RF FILED/CE 11/1/8/2009 99:52:43 RF FILED						411 BM (1 1) 18		
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THE ABOVE SPACE IS FOR FILING OFFICE USE ON. THE ABOVE SPACE IS FOR FILING OFFICE USE. THE ABOVE SPACE IS FOR FILING. THE ABOVE SPACE IS FOR FI		4	1-1-	MIDDLE NAME, SUFFI	IX	Shelhy	Cnty Judge of	Propate, HL
ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - Insert only one name (11a or 11b) - do not abbreviate or combine names	D. MISCELLANEOUS:					11/18/	2009 09:52:40 P	M FILED/CERT
1. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - Insert only one name (11a or 11b) - do not abbreviate or combine names 11a. ORGANIZATION'S NAME 11b. INDIVIDUAL'S LAST NAME 11c. MAILING ADDRESS 11c. MAILING ADDRESS 11d. TAX ID #: SSN OR EIN ADDITIONAL DEBTOR 11e. TYPE OF ORGANIZATION 11f. JURISDICTION OF ORGANIZATION 11g. ORGANIZATIONAL ID #, if any DEBTOR 12b. INDIVIDUAL'S LAST NAME 12c. INDIVIDUAL'S LAST NAME 12d. INDIVIDUAL'S LAST NAME 12d. INDIVIDUAL'S LAST NAME 15d. Additional collateral description: 16d. Additional collateral description: 17d. Additional collateral description: 17d. Additional collateral description:								
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Title Notivibual's Last Name First Name Middle Name SUFFIX	11a. ORGANIZATION'S N	NAME	LEGAL NAIVIE - Insert only of	ne name (11a or 11b) - do not abbr	eviate or combine n	ames	<u>.</u>	
Title Notivibual's Last Name First Name Middle Name SUFFIX							•	•
C. MAILING ADDRESS CITY STATE POSTAL CODE COUNTI	R 11b. INDIVIDUAL'S LAST	NAME		FIRST NAME		MIDDLE	NAME	SUFFIX
Id. TAX ID #: SSN OR EIN OR EI								
ORGANIZATION DESTOR 2. ADDITIONAL SECURED PARTY'S or ASSIGNOR S/P'S NAME - insert only gag name (12a or 12b) 12a. ORGANIZATION'S NAME FIRST NAME FIRST NAME MIDDLE NAME SUFFIX 3. This FINANCING STATEMENT covers timber to be cut or as-extracted collateral, or is filed as a focture filing. 1. Description of real estate: Name and address of a RECORD OWNER of above-described real estate	c. MAILING ADDRESS			CITY		STATE	POSTAL CODE	COUNTRY
2. ADDITIONAL SECURED PARTY'S or ASSIGNOR S/P'S NAME - insert only one name (12a or 12b) 12a. ORGANIZATIONS NAME 12b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX 2c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTE 3. This FinANCING STATEMENT covers timber to be cut or as-extracted colleteral, or is filed as a fixture filing. 4. Description of real estate: NAME - insert only one name (12a or 12b) FIRST NAME MIDDLE NAME SUFFIX 16. Additional collateral description:	d. TAX ID #: SSN OR EIN	ORGANIZATION '	11e. TYPE OF ORGANIZATION	11f. JURISDICTION OF ORG	ANIZATION	11g. ORG	SANIZATIONAL ID#, if a	any NONE
Trist Financing address of a RECORD OWNER of above-described real estate First NAME SUFFIX			ASSIGNOR S/I	P'S NAME - insert only <u>one</u> nam	ne (12a or 12b)			
Ex. MAILING ADDRESS CITY STATE POSTAL CODE COUNTR This FINANCING STATEMENT covers timber to be cut or as-extracted collateral, or is filed as a fixture filing. Description of real estate: Name and address of a RECORD OWNER of above-described real estate	R 12h INDIVIDUAL'S LAST	NAME		IE(DOTALANE	· · · · · · · · · · · · · · · · · · ·	· ·······		
3. This FINANCING STATEMENT covers timber to be cut or as-extracted collateral, or is filed as a fixture filing. 1. Description of real estate: 1. Name and address of a RECORD OWNER of above-described real estate	12D. MADIAIDONE 3 EAST	IVANC		FIRST NAME		MIDDLE	NAME	SUFFIX
3. This FINANCING STATEMENT covers timber to be cut or as-extracted collateral, or is filed as a fixture filing. 4. Description of real estate: 16. Additional collateral description:	2c. MAILING ADDRESS			CITY		STATE	POSTAL CODE	COLINTRY
collateral, or is filed as a fixture filing. 4. Description of real estate: 5. Name and address of a RECORD OWNER of above-described real estate						01,7112	1 001742 0002	COUNTRY
	collateral, or is filed as a	fixture filing.	per to be cut or as-extracted	16. Additional collateral desc	cription:			
17. Check only if applicable and check only one box. Debtor is a Trust or Trustee acting with respect to property held in trust or Decedent's 18. Check only if applicable and check only one box. Debtor is a TRANSMITTING UTILITY			bove-described real estate	Debtor is a Trust or 18. Check only if applicable a	Trustee acting with	h respect to pr	operty held in trust or	Decedent's Estate
Filed in connection with a Manufactured-Home Transaction — effective 30 years				Filed in connection with a	Manufactured-Hor	ne Transaction	— effective 30 years	
Filed in connection with a Public-Finance Transaction effective 30 years							_	



THIS INSTRUMENT PREPARED BY: Law Offices of Jeff W. Parmer, LLC 402 Office Park Drive, Suite 290

GRANTEE'S ADDRESS:

Philip: C. Thomason 1421 Whirlaway Court

\ .	Birmingham, Alabama 35223	Helena, AL 35080.					
•	STATE OF ALABAMA)	GENERAL WARRANTY DEED					
	COUNTY OF SHELBY)		20091118000428550 3/3 \$37.35 20091118000428550 3/3 \$37.35 Shelby Cnty Judge of Probate, AL 11/18/2009 09:52:40 AM FILED/CERT				
	KNOW ALL MEN BY THESE PRES	ENTS: That, for and in consideration of One Hundred	d Seventy				
	Thousand and no/100	(\$_170,000.00.) DOLLARS, and other undersigned Hewitt Relocation Services, Inc., a Cali	er good and valuable				
	referred to as GRANTOR), the receipt	whereof is hereby acknowledged, the GRANTOR does he	norma Corporation, (nerem reby give, grant, bargain.				
	sell and convey unto the GRANTEES, Philip C. Thomason and wife, Melanie L. Thomason						
	GRANTEES), their heirs and assigns,	the following described Real Estate, lying and being in the	nereinafter referred to as County of Shelby, State of				
	Alabama, to-wit:						
	Lot 30, according to the Surve in the Probate Office of Shelb	ey of Dearing Downs, Fourth Addition, as recorded in Map by County, Alabama.	Book 9, page 179,				
	Subject to existing easements,	current taxes, restrictions, set-back lines and rights of way	y, if any, of record.				
	\$ 170,000,00 simultaneously herewith.	of the Purchase Price was paid from the proceeds of a r	mortgage recorded				
		or parcel of land above described together with all and sing ements unto the said GRANTEES, their heirs and assigns fo					
	AND SAID GRANTOR, for said GRANTOR, GRANTOR'S heirs, successors, executors and administrators, covenants with GRANTEES, and with GRANTEES' heirs and assigns, that GRANTORS are lawfully seized in fee simple of the said Real Estate; that said Real Estate is free and clear from all Liens and Encumbrances, except as hereinabove set forth, and except for taxes due for the current and subsequent years, and except for any Restrictions pertaining to the Real Estate of record in the Probate Office of said County; and that GRANTOR will, and GRANTOR'S heirs, executors and administrators shall, warrant and defend the same to said GRANTEES, and GRANTEES' heirs and assigns, forever against the lawful claims of all persons.						
	IN WITNESS WHEREOF, said GRAN	NTOR has hereunto set their hands and seals this the $_{27t}$	h day of May 2005.				
		Hewitt Relocation Services, Inc.	. •				
		By: Wa MUM					
		Its:					
	_ <u>i</u>		-				
	STATE OF ()						
	COUNTY OF TOUR FICE						
1	l, the undersigned, a Notary Public, in a	and for said County and State, hereby certify that	aMerahan				
1	whose name as California corporation is '						
Ç	signed to the foregoing conveyance and who is known to me, acknowledged before me on this day that, being informed of the contents, so as such and with such authority, executed the same						
1	voluntarily for and as the act of said cor	poration.					

NOTARY PUBLIC My Commission Expires: A. STARKES NOTARY PUBLIC MY COMMISSION EXPIRES OCT. 31, 2007
