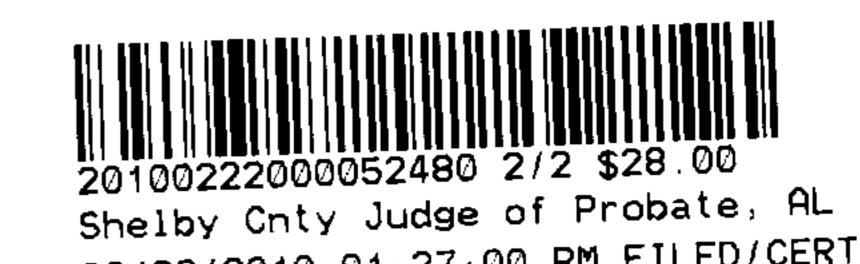


UCC FINANCING STATEMENT AMENDME FOLLOW INSTRUCTIONS (front and back) CAREFULLY	NT		
A. NAME & PHONE OF CONTACT AT FILER [optional]			
Ann Moore 205/297-4178			
B. SEND ACKNOWLEDGMENT TO: (Name and Address)			
Compass Bank			
15 So 20th St			
Suite 201			
Birmingham, AL 35233			
Section 1.	THE ABOVE	SPACE IS FOR FILING OFFICE U	SE ONLY
1a. INITIAL FINANCING STATEMENT FILE#		1b. This FINANCING STATEME	
See Attached Addendum		to be filed [for record] (or re REAL ESTATE RECORDS.	
2. TERMINATION: Effectiveness of the Financing Statement identified above	e is terminated with respect to security interest(s) of	the Secured Party authorizing this Termin	nation Statement.
3. CONTINUATION: Effectiveness of the Financing Statement identified a continued for the additional period provided by applicable law.	bove with respect to security interest(s) of the Sec	ured Party authorizing this Continuation	Statement is
4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b as	nd address of assignee in item 7c; and also give nam	te of assignor in item 9.	
5. AMENDMENT (PARTY INFORMATION): This Amendment affects	Debtor or Secured Party of record. Check or	ly one of these two boxes.	
است Also check <u>one</u> of the following three boxes <u>and</u> provide appropriate information			
CHANGE name and/or address: Give current record name in item 6a or 6b;	also give new DELETE name: Give record	name	7a or 7b, and also
name (if name change) in item 7a or 7b and/or new address (if address charge)	nge) in item 7c. to be deleted in item 6a or 6b	item 7c; also complete item	is /d-/g (ir applicable).
6. CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME			
Eddleman Homes, LLC			······································
6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
7. CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME	·		
OR			
7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
7c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
7d. TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TYPE OF ORGANIZATION   ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if an	أسا
DEBTOR	######################################	***************************************	NONE
8. AMENDMENT (COLLATERAL CHANGE): check only one box.	}I		
Describe collateral V deleted or added, or give entire restated colla	teral description, or describe collateralassign	ied.	
PARTIAL			
			_
Lots 6-072, 6-073, 6-074, 6-075, 6-076 and 6-077, acco	rding to the Plat of Chelsea Park 6t	h Sector, as recorded in Ma	p Book 37,
page 13, in the Probate Office of Shelby County, Alaba	ma		
<ol> <li>NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS A adds collateral or adds the authorizing Debtor, or if this is a Termination authoriz</li> </ol>			ed by a Debtor which
9a. ORGANIZATION'S NAME			
Compass Bank			
OR 9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
10. OPTIONAL FILER REFERENCE DATA		**************************************	
IU. OF THE PROPERTY LINE TO LEGAL DATA			
		· · · · · · · · · · · · · · · · ·	



02/22/2010 01:27:00 PM FILED/CERT

## ADDENDUM TO UCC