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ALABAMA POWER COMPANY 600 NORTH 18TH STREET BIRMINGHAM, AL 35203    Shelby City Judge of Probate AL 04/28/2010 10:37:23 PM FILED/CERT   THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY   Initial Financing Statement File # 20060224000089730/SHELBY   THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY   Initial Financing Statement Identified above is terminated with respect to security interest(s) of the Secured Party subtricting this Termination Statement is continuated for the additional partial provided by applicable law.   CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party subtricting this Continuation Statement is continuated for the additional partial Given name of assignee in Iden 7a to 7b and address of assignee in Iden 7c, and also give name of assignor in Iden 9.   AMENDMENT (PARTY INFORMATION): This Amendment affects   Debtor or   Secured Party of record. Check only one of these two boxes.   Also check gage of the following three boxes and provide appropriate information in idens 6 and/or 7.   CIFANGE name and/or address. Give current record name in Iden 6a or 6b; also give name of assignor in Iden 9.   CURRENT RECORD INFORMATION: The Amendment affects   Debtor or   Secured Party of record. Check only one of these two boxes.   Also check gage of the following three boxes and provide appropriate information in idens 6 and/or 7.   CIFANGE name and/or address. Give current record name in Iden 6a or 6b; also give name of assignor in Iden 7c; also complete item 7c or 7b, and at many file and partial following three boxes and provide appropriate information in idens 6 and/or 7.   CIFANGE NAME   FIRST NAME   MIDDLE NAME   SUFFIX   A.   CHANGED (NEW) OR ADDED INFORMATION: The file of the file of the following three sources and partial file of the following three sources and partial file of the following three files 7c or following			·				
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	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	6b. INDIVIDUAL'S LAST NAME WISE  CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  MAILING ADDRESS  460 CAMBRIAN RIDGE TRAIL  TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TYPE OF ORGANIZATION DEBTOR   AMENDMENT (COLLATERAL CHANGE): check only one box.	FIRST NAME  CITY  PELHAM  7f. JURISDICTION OF		A.  MIDDLE  STATE AL  7g. ORG	NAME POSTAL CODE 35124	SUFFIX
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NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Dabter wi	R	Gb. INDIVIDUAL'S LAST NAME WISE  CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  MAILING ADDRESS  460 CAMBRIAN RIDGE TRAIL  TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TYPE OF ORGANIZATION   ORGANIZATION   DEBTOR    AMENDMENT (COLLATERAL CHANGE): check only one box.  Describe collateral   deleted or   added, or give entire   restated co	FIRST NAME  CITY PELHAM  7f. JURISDICTION OF	pe collateral assigned	A.  STATE AL  7g. ORG	POSTAL CODE 35124 SANIZATIONAL ID #, if any	COUNTRY
NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor will adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here and enter name of DEBTOR authorizing this Amendment.	R A D	Gb. INDIVIDUAL'S LAST NAME WISE  CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  MAILING ADDRESS  460 CAMBRIAN RIDGE TRAIL  TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TYPE OF ORGANIZATION   DEBTOR    AMENDMENT (COLLATERAL CHANGE): check only one box.  Describe collateral   deleted or   added, or give entire   restated co	FIRST NAME  CITY PELHAM  If JURISDICTION OF descrit  AMENDMENT (name of asset)	be collateral assigned	MIDDLE STATE AL 7g. ORG	POSTAL CODE 35124  SANIZATIONAL ID #, if any	COUNTRY
adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here and enter name of DEBTOR authorizing this Amendment.  9a. ORGANIZATION'S NAME	R Na Na	Gb. INDIVIDUAL'S LAST NAME WISE  CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  MAILING ADDRESS  460 CAMBRIAN RIDGE TRAIL  TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR    AMENDMENT (COLLATERAL CHANGE): check only one box.  Describe collateral   deleted or   added, or give entire   restated co	FIRST NAME  CITY PELHAM  If JURISDICTION OF descrit  AMENDMENT (name of asset)	be collateral assigned	MIDDLE STATE AL 7g. ORG	POSTAL CODE 35124  SANIZATIONAL ID #, if any	COUNTRY
adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here and enter name of DEBTOR authorizing this Amendment.  9a. ORGANIZATION'S NAME  ALABAMA POWER COMPANY	R N a N a	Gb. INDIVIDUAL'S LAST NAME WISE  CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  MAILING ADDRESS  460 CAMBRIAN RIDGE TRAIL  TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TYPE OF ORGANIZATION   DEBTOR    AMENDMENT (COLLATERAL CHANGE): check only one box.  Describe collateral   deleted or   added, or give entire   restated co	FIRST NAME  CITY PELHAM  If JURISDICTION OF descrit  AMENDMENT (name of asset)	be collateral assigned	MIDDLE STATE AL 7g. ORG	POSTAL CODE 35124  SANIZATIONAL ID #, if any	COUNTRY