



A. NAME & PHONE OF CONTACT AT FILER [optional]			
John L. Hartman, III (205) 879-0500	; ;		
B. SEND ACKNOWLEDGMENT TO: (Name and Address)			
John L. Hartman, III			
Hartman & Springfield	1		
P. O. Box 846			
Birmingham, AL 35201-0846			
	THE ABOVE S	PACE IS FOR FILING OFFICE	USE ONLY
1a. INITIAL FINANCING STATEMENT FILE #	0000000	1b. This FINANCING STATEM to be filed [for record] (or	
20050525000254510, 20060810000389940, 20060810		REAL ESTATE RECORDS	S
2. TERMINATION: Effectiveness of the Financing Statement identified above	is terminated with respect to security interest(s) of the	ne Secured Party authorizing this Tern	nination Stateme
3. CONTINUATION: Effectiveness of the Financing Statement identified about continued for the additional period provided by applicable law.	ove with respect to security interest(s) of the Secu	red Party authorizing this Continuation	n Statement is
4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and			
5. AMENDMENT (PARTY INFORMATION): This Amendment affects De		one of these two boxes.	
Also check one of the following three boxes and provide appropriate information in			
CHANGE name and/or address: Give current record name in item 6a or 6b; als name (if name change) in item 7a or 7b and/or new address (if address change	so give new DELETE name: Give record na e) in item 7c. to be deleted in item 6a or 6b.	ame ADD name: Complete ite item 7c; also complete ite	m 7a or 7b, and ms 7d-7g (if app
6. CURRENT RECORD INFORMATION:			
6a. ORGANIZATION'S NAME Cababa Basab Investments I I C			
Cahaba Beach Investments, LLC OR 66. INDIVIDUAL'S LAST NAME			
11 166. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFI
OR 7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFI
7c. MAILING ADDRESS	CITY		
FO. WINICITO ADDITEGO	CITY	STATE POSTAL CODE	COUN
ADD'L INFO RE 7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	Z- ODCANIZATIONAL ID # IF	
ORGANIZATION	71. JURISDIC HON OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if a	any —
DEBTOR			
 AMENDMENT (COLLATERAL CHANGE): check only one box. Describe collateral deleted or added, or give entire restated collater 			
Describe conateral P deleted of added, of give entire restated conater	rai description, or describe collateralassigne	d.	
Unit 102, Building 1, in the Lofts	at Edenton, a Condom	inium, as recordo	ed in
Map Book 41, page 110 in the Probat	e Office of Shelby Cou	unty, Alabama.	
NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AM	ENDMENT (name of assignor, if this is an Assignr	nent). If this is an Amendment authori	zed by a Debtor
adds collateral or adds the authorizing Debtor, or if this is a Termination authorized	ENDMENT (name of assignor, if this is an Assignr by a Debtor, check here and enter name of Di	nent). If this is an Amendment authori EBTOR authorizing this Amendment.	ized by a Debtor
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AM adds collateral or adds the authorizing Debtor, or if this is a Termination authorized 9a. ORGANIZATION'S NAME	ENDMENT (name of assignor, if this is an Assignr by a Debtor, check here and enter name of DE	nent). If this is an Amendment authori EBTOR authorizing this Amendment.	zed by a Debtor
adds collateral or adds the authorizing Debtor, or if this is a Termination authorized 9a. ORGANIZATION'S NAME Compass Bank	ENDMENT (name of assignor, if this is an Assignr by a Debtor, check here and enter name of DE	nent). If this is an Amendment authori EBTOR authorizing this Amendment.	zed by a Debtor
9a. ORGANIZATION'S NAME	ENDMENT (name of assignor, if this is an Assignr by a Debtor, check here and enter name of DEFIRST NAME	nent). If this is an Amendment authori EBTOR authorizing this Amendment.	zed by a Debtor