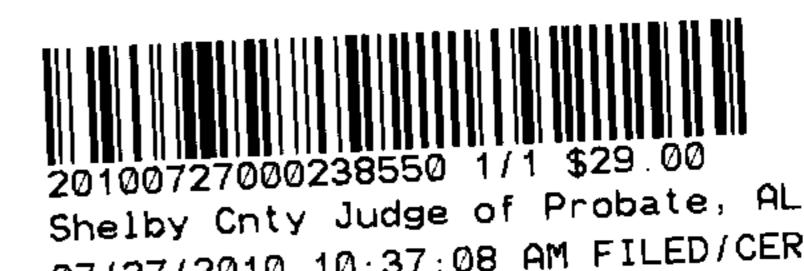
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				20100/2/000236330 1/1		
UCC FINANCING	S STATEMENT AMENDMEN	JT	WIIZE	72010 10 10		
	S (front and back) CAREFULLY					
John L. Hartman, II	ONTACT AT FILER [optional]					
	MENT TO: (Name and Address)					
D. SEND ACKNOVILEDG	WENT TO: (Name and Address)					
John L. Hartr	nan, III					
Hartman & S						
P. O. Box 846	6					
Birmingham,	AL 35201-0846					
		THE ABOVE	SPACE IS F	OR FILING OFFICE US	E ONLY	
1a. INITIAL FINANCING STATEMENT FILE #				1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the		
20061024000523130, 20061024000523440, 20061024000523510			_ V R	EAL ESTATE RECORDS.	<u> </u>	
	ectiveness of the Financing Statement identified above i					
	Effectiveness of the Financing Statement identified about identified about the second provided by applicable law.	ove with respect to security interest(s) of the Secu	ired Party aut	thorizing this Continuation S	Statement is	
4. ASSIGNMENT (full o	or partial): Give name of assignee in item 7a or 7b and	address of assignee in item 7c; and also give nam	e of assignor i	n item 9.		
5. AMENDMENT (PARTY	/ INFORMATION): This Amendment affects De	ebtor <u>or</u> Secured Party of record. Check onl	y <u>one</u> of these	e two boxes.		
	ving three boxes and provide appropriate information in					
name (if name change)	address: Give current record name in item 6a or 6b; als in item 7a or 7b and/or new address (if address change	bo give new DELETE name: Give record record in item 7c. to be deleted in item 6a or 6b.	ame /	ADD name: Complete item 7 tem 7c; also complete items	7a or 7b, and also 7d-7g (if applicable	
CURRENT RECORD INF			·			
6a. ORGANIZATION'S N						
Cahaba Beach In			· · · · · · · · · · · · · · · · · · ·			
6b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	E NAME	SUFFIX	
'. CHANGED (NEW) OR AD	ODED INFORMATION:					
7a. ORGANIZATION'S N.						
7b. INDIVIDUAL'S LAST NAME		FIRST NAME		E NAME	SUFFIX	
c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY	
	ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR	7f. JURISDICTION OF ORGANIZATION	7g. OR	GANIZATIONAL ID #, if any		
AMENDMENT (COLLA				.	NON	
·	TERAL CHANGE): check only <u>one</u> box. eted or added, or give entire restated collater	al description, or describe collateral assigne	ed.			
ΡΛΡΤΙΛΙ • 11m	it 205, Building 2, Loft	te at Edanton 2nd Ame	nded N	fan ac reco	rdod	
			inded r	ap, as reco.	raea	
in map book	41, Page 121, Shelby Cou	unty, Alabama.				
. NAME OF SECURED I	PARTY OF RECORD AUTHORIZING THIS AMI	ENDMENT (name of assignor, if this is an Assign	ment). If this	is an Amendment authorized	by a Debtor which	
adds collateral or adds the a	authorizing Debtor, or if this is a Termination authorized	by a Debtor, check here and enter name of D	EBTOR auth	orizing this Amendment.		
9a. ORGANIZATION'S NA	ME					
Compass Bank						
9b. INDIVIDUAL'S LAST	NAME	FIRST NAME	MIDDLE	NAME	SUFFIX	
O OPTIONAL FILER REFEREI	NCE DATA			-	<u> </u>	
Judge of Probate, Sh	elby County					
/	July Country					