	NAME & PHONE OF CONTACT AT FILER [optional] ANICE RUFFIN 205-226-1902 SEND ACKNOWLEDGMENT TO: (Name and Address)  ALABAMA POWER COMPANY 600 N 18TH STREET BIRMINGHAM, AL 35291		20100806000252750 1/1 \$.00 Shelby Cnty Judge of Proba 08/06/2010 11:32:54 AM FIL	
			HE ABOVE SPACE IS FOR FILING OFFICE U	JSE ONLY
la. I	INITIAL FINANCING STATEMENT FILE # 20091217000462340 / 1		1b. This FINANCING STATEM to be filed [for record] (or r	ENT AMENDMEN' ecorded) in the
2. 2	TERMINATION: Effectiveness of the Financing Statement identified about	ove is terminated with respect to security	REAL ESTATE RECORDS interest(s) of the Secured Party authorizing this Term	
3.	CONTINUATION: Effectiveness of the Financing Statement identified continued for the additional period provided by applicable law.			
	ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b	and address of assignee in item 7c; and	also give name of accionar in item 0	<del></del>
_ <b>_</b>			rd. Check only <u>one</u> of these two boxes.	
	Also check one of the following three boxes and provide appropriate information		id. Check only <u>one</u> of these two boxes.	
Γ	CHANGE name and/or address: Give current record name in item 6a or 6b name (if name change) in item 7a or 7b and/or new address (if address change)	e; also give new ange) in item 7c. DELETE name:		m 7a or 7b, and als
	CURRENT RECORD INFORMATION:	ange) in item 7c. Lato be deleted in	item 6a or 6b. item 7c; also complete ite	ms 7d-7g (if applica
	6a. ORGANIZATION'S NAME	······································		
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R	6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
	ROBERSON	JONATHAN	В	
(	CHANGED (NEW) OR ADDED INFORMATION:			
	7a. ORGANIZATION'S NAME			
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``	7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
	MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTR
	539 SEQUOIA TRIAL	ALABASTER	AL 35007	US
1		7f. JURISDICTION OF ORGANIZ	ATION 7g. ORGANIZATIONAL ID #, if a	· F
1	TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR	1	1	
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