CC FINANCING STATEMENT OLLOW INSTRUCTIONS (front and back) CARI NAME & PHONE OF CONTACT AT FILER [op. RUFFIN/205.226.1902 SEND ACKNOWLEDGMENT TO: (Name and ALABAMA POWER COMPA 600 NORTH 18TH STREET BIRMINGHAM, AL 35203	Address)	20100907000288790 1/1 \$.00 20100907000288790 1/1 \$.00 Shelby Cnty Judge of Probate, AL 09/07/2010 02:21:37 PM FILED/CER	
		THE ABOVE SPACE IS FOR FILING OFFICE USI	E ONLY
a. INITIAL FINANCING STATEMENT FILE #  20071211000558960/SHELBY  TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to		1b. This FINANCING STATEMENT AMENDMENT to be filed [for record] (or recorded) in the REAL ESTATE RECORDS.  to security interest(s) of the Secured Party authorizing this Termination Statement.	
	ssignee in item 7a or 7b and address of assignee in item 7c; a		
CHANGE name and/or address: Give current reconame (if name change) in item 7a or 7b and/or nev CURRENT RECORD INFORMATION:  6a. ORGANIZATION'S NAME	w address (if address change) in item 7c. to be deleted	e: Give record name ADD name: Complete item 7 item 6a or 6b. item 7c; also complete items	7d-7g (if applica
66. INDIVIDUAL'S LAST NAME HOLT	FIRST NAME RICKY	MIDDLE NAME	SUFFIX
		J.	
CHANGED (NEW) OR ADDED INFORMATION:			
7a. ORGANIZATION'S NAME			
7a. ORGANIZATION'S NAME			
7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME	FIRST NAME  MELICOA	MIDDLE NAME	SUFFIX
7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  HOLT	MELISSA	B.	
7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  HOLT  MAILING ADDRESS			
7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  HOLT  MAILING ADDRESS  420 8TH ST SW  TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TY	MELISSA  CITY  ALABASTER	B.  STATE POSTAL CODE  AL 35007	COUNTRY
7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  HOLT  MAILING ADDRESS  420 8TH ST SW	MELISSA  CITY  ALABASTER	B.  STATE POSTAL CODE  AL 35007	COUNTRY
7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  HOLT  MAILING ADDRESS  420 8TH ST SW  TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TY ORGANIZATION DEBTOR    AMENDMENT (COLLATERAL CHANGE): checkers.	MELISSA  CITY  ALABASTER  YPE OF ORGANIZATION 7f. JURISDICTION OF ORGANIZATION one box.	B.  STATE POSTAL CODE  AL 35007  NIZATION 7g. ORGANIZATIONAL ID #, if any	COUNTRY
7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  HOLT  MAILING ADDRESS  420 8TH ST SW  TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TY ORGANIZATION DEBTOR    AMENDMENT (COLLATERAL CHANGE): check	MELISSA  CITY  ALABASTER  YPE OF ORGANIZATION 7f. JURISDICTION OF ORGAN	B.  STATE POSTAL CODE  AL 35007  NIZATION 7g. ORGANIZATIONAL ID #, if any	COUNTRY
7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  HOLT  MAILING ADDRESS  420 8TH ST SW  TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TY ORGANIZATION DEBTOR    AMENDMENT (COLLATERAL CHANGE): check	MELISSA  CITY  ALABASTER  YPE OF ORGANIZATION 7f. JURISDICTION OF ORGANIZATION one box.	B.  STATE POSTAL CODE  AL 35007  NIZATION 7g. ORGANIZATIONAL ID #, if any	COUNTRY
7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  HOLT  MAILING ADDRESS  420 8TH ST SW  TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TY ORGANIZATION DEBTOR    AMENDMENT (COLLATERAL CHANGE): check	MELISSA  CITY  ALABASTER  YPE OF ORGANIZATION 7f. JURISDICTION OF ORGANIZATION one box.	B.  STATE POSTAL CODE  AL 35007  NIZATION 7g. ORGANIZATIONAL ID #, if any	COUNTRY
7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  HOLT  MAILING ADDRESS  420 8TH ST SW  TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TY ORGANIZATION DEBTOR    AMENDMENT (COLLATERAL CHANGE): check	MELISSA  CITY  ALABASTER  YPE OF ORGANIZATION 7f. JURISDICTION OF ORGANIZATION one box.	B.  STATE POSTAL CODE  AL 35007  NIZATION 7g. ORGANIZATIONAL ID #, if any	COUNTRY
7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  HOLT  MAILING ADDRESS  420 8TH ST SW  TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TY ORGANIZATION DEBTOR    AMENDMENT (COLLATERAL CHANGE): check	MELISSA  CITY  ALABASTER  YPE OF ORGANIZATION 7f. JURISDICTION OF ORGANIZATION one box.	B.  STATE POSTAL CODE  AL 35007  NIZATION 7g. ORGANIZATIONAL ID #, if any	COUNTRY
7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  HOLT  MAILING ADDRESS  420 8TH ST SW  TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TY ORGANIZATION DEBTOR    AMENDMENT (COLLATERAL CHANGE): check	MELISSA  CITY  ALABASTER  YPE OF ORGANIZATION 7f. JURISDICTION OF ORGANIZATION one box.	B.  STATE POSTAL CODE  AL 35007  NIZATION 7g. ORGANIZATIONAL ID #, if any	COUNTRY
7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  HOLT  MAILING ADDRESS  420 8TH ST SW  TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TY ORGANIZATION DEBTOR    AMENDMENT (COLLATERAL CHANGE): check	MELISSA  CITY  ALABASTER  YPE OF ORGANIZATION 7f. JURISDICTION OF ORGANIZATION one box.	B.  STATE POSTAL CODE  AL 35007  NIZATION 7g. ORGANIZATIONAL ID #, if any	COUNTRY
7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  HOLT  MAILING ADDRESS  420 8TH ST SW  TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TY ORGANIZATION DEBTOR    AMENDMENT (COLLATERAL CHANGE): checked.	MELISSA  CITY  ALABASTER  YPE OF ORGANIZATION 7f. JURISDICTION OF ORGANIZATION one box.	B.  STATE POSTAL CODE  AL 35007  NIZATION 7g. ORGANIZATIONAL ID #, if any	COUNTRY
7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  HOLT  MAILING ADDRESS  420 8TH ST SW  TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TY ORGANIZATION DEBTOR    AMENDMENT (COLLATERAL CHANGE): checons collateral   deleted or   added, or given added   added	MELISSA CITY ALABASTER  YPE OF ORGANIZATION  7f. JURISDICTION OF ORGAN  ock only one box.  Ye entire restated collateral description, or describe collateral description.	B.  STATE POSTAL CODE AL 35007  NIZATION 7g. ORGANIZATIONAL ID #, if any  eral assigned.	COUNTRY
7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  HOLT  MAILING ADDRESS  420 8TH ST SW  TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TY ORGANIZATION DEBTOR    AMENDMENT (COLLATERAL CHANGE): check or give deleted or   added, or give deleted or   added, or give deleted or   added   adde	MELISSA  CITY  ALABASTER  YPE OF ORGANIZATION 7f. JURISDICTION OF ORGANIZATION one box.	B.  STATE POSTAL CODE AL 35007  NIZATION 7g. ORGANIZATIONAL ID #, if any eral assigned.	COUNTRY
7a. ORGANIZATION'S NAME  To. INDIVIDUAL'S LAST NAME  HOLT  MAILING ADDRESS  420 8TH ST SW  TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TY ORGANIZATION DEBTOR    AMENDMENT (COLLATERAL CHANGE): chect or   added, or given become added or   added, or given become added or   added	MELISSA  CITY  ALABASTER  PE OF ORGANIZATION  7f. JURISDICTION OF ORGANIZATION  restated collateral description, or describe collateral description, or describe collateral description and describe collateral description and describe collateral description, or describe collateral description described and description described collateral description described collateral description described collateral description described collateral described collateral description described collateral descri	B.  STATE POSTAL CODE AL 35007  NIZATION 7g. ORGANIZATIONAL ID #, if any eral assigned.	COUNTRY
75. INDIVIDUAL'S LAST NAME HOLT  MAILING ADDRESS  420 8TH ST SW  TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TY ORGANIZATION DEBTOR    AMENDMENT (COLLATERAL CHANGE): check or given by the collateral   deleted or   added, or given by the collateral   deleted or   added   deleted or   added   deleted or   added   deleted or   added   deleted   delet	MELISSA  CITY  ALABASTER  PE OF ORGANIZATION  7f. JURISDICTION OF ORGANIZATION  restated collateral description, or describe collateral description, or describe collateral description and describe collateral description and describe collateral description, or describe collateral description described and description described collateral description described collateral description described collateral description described collateral described collateral description described collateral descri	B.  STATE POSTAL CODE AL 35007  NIZATION 7g. ORGANIZATIONAL ID #, if any eral assigned.	COUNTRY