NAME & PHONE OF CONTACT AT FILER [optional] RUFFIN/205.226.1902 SEND ACKNOWLEDGMENT TO: (Name and Address) ALABAMA POWER COMPANY 600 NORTH 18TH STREET BIRMINGHAM, AL 35203		20100907000288840 1/1 \$.00 20100907000288840 1/1 \$.00 Shelby Cnty Judge of Probate, AL 09/07/2010 02:21:42 PM FILED/CERT		
		THE ABOVE SPACE	IS FOR FILING OFFICE U	ISE ONLY
a. INITIAL FINANCING STATEMENT FILE # 20090515000182780/SHELBY		1b. This FINANCING STATEMENT AMENDMENT to be filed [for record] (or recorded) in the		
X TERMINATION: Effectiveness of the Financing Statement identifie	ed above is terminated with respect	j 1	I REAL ESTATE RECORDS	
CONTINUATION: Effectiveness of the Financing Statement iden	ntified above with respect to secur	ity interest(s) of the Secured Par	rty authorizing this Continuation	Statement is
applicable law.				
ASSIGNMENT (full or partial): Give name of assignee in item 7a of				
AMENDMENT (PARTY INFORMATION): This Amendment affect	L	arty of record. Check only one of	f these two boxes.	
Also check one of the following three boxes and provide appropriate inform CHANGE name and/or address: Give current record name in item 6a				
name (if name change) in item /a or /b and/or new address (if address		ETE name: Give record name deleted in item 6a or 6b.	ADD name: Complete iten item 7c; also complete iten	7a or 7b, and als
CURRENT RECORD INFORMATION:			The state of the s	is ru-rg (ii applica
6a. ORGANIZATION'S NAME				
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7a. ORGANIZATION'S NAME		· · · · · · · · · · · · · · · · · · ·		
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7b. INDIVIDUAL'S LAST NAME				
7b. INDIVIDUAL'S LAST NAME MAILING ADDRESS	CITY	S	TATE POSTAL CODE	
7b. INDIVIDUAL'S LAST NAME MAILING ADDRESS 599 TREYMOOR LAKE CIRCLE	CITY ALABASTER	S A	TATE POSTAL CODE LL 35007	COUNTRY
7b. INDIVIDUAL'S LAST NAME MAILING ADDRESS 699 TREYMOOR LAKE CIRCLE TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATION	CITY ALABASTER	S A	TATE POSTAL CODE	COUNTRY
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