	LOW INSTRUCTIONS (front and back) CAREFULLY NAME & PHONE OF CONTACT AT FILER [optional]				
	RUFFIN/205.226.1902				
3. \$	SEND ACKNOWLEDGMENT TO: (Name and Address)				
	ALABAMA POWER COMPANY				
	600 NORTH 18TH STREET	2010 She	01025000355750 lby Cnty Judge	of Probate, AL	-
	BIRMINGHAM, AL 35203	10/	25/2010 10:36:0	2 AM FILED/CER	?T
		THE AB	OVE SPACE IS FOR	FILING OFFICE US	SE ONLY
ı. I	NITIAL FINANCING STATEMENT FILE # $20071005000467250/\mathrm{SHEI}$	LBY	to be	INANCING STATEME filed [for record] (or rec	
5	TERMINATION: Effectiveness of the Financing Statement identified above is	terminated with respect to security interest	REAL	ESTATE RECORDS.	
Í	CONTINUATION: Effectiveness of the Financing Statement identified above		······································		
_	continued for the additional period provided by applicable law.				
Į,	ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and a	ddress of assignee in item 7c; and also giv	e name of assignor in ite	m 9.	
		otor or Secured Party of record. Che	eck only <u>one</u> of these two	o boxes.	
	Iso check one of the following three boxes and provide appropriate information in its CHANGE name and/or address: Give current record name in item 6a or 6b; also	give new TT DELETE name: Give re	cord name T ADD	name: Complete item	7a or 7h, and als
	name (if name change) in item 7a or 7b and/or new address (if address change)	in item 7c. to be deleted in item 6a		7c; also complete item	s 7d-7g (if application
	CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME	······································	······································	······································	······································
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R	6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NA	AME	SUFFIX
•	POPE	FIRST NAME WENDY	MIDDLE NA	AME	SUFFIX
•				AME	SUFFIX
(POPE CHANGED (NEW) OR ADDED INFORMATION:			AME	SUFFIX
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₹	POPE CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME	WENDY FIRST NAME	F.	AME	SUFFIX
?	POPE CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME MAILING ADDRESS	WENDY FIRST NAME CITY	F. MIDDLE NA	AME POSTAL CODE	SUFFIX
₹ 2	POPE CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME	WENDY FIRST NAME	F. MIDDLE NA STATE F AL	AME POSTAL CODE 35115	SUFFIX
2	POPE CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME MAILING ADDRESS 230 COUNTRY RIDGE RD	FIRST NAME CITY MONTEVALLO	F. MIDDLE NA STATE F AL	AME POSTAL CODE	SUFFIX
2	POPE CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME MAILING ADDRESS 230 COUNTRY RIDGE RD TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION	FIRST NAME CITY MONTEVALLO	F. MIDDLE NA STATE F AL	AME POSTAL CODE 35115	SUFFIX
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