

UCC FINANCING STATEMENT

Shelby
29.00
4.80
33.80



20101115000382250 1/3 \$35.80
Shelby Cnty Judge of Probate, AL
11/15/2010 01:25:28 PM FILED/CERT

A/AGASCO
#20 20TH ST
BIRMINGHAM AL

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

WILSON
PO BOX 1120

BOBBIE
ALABASTER AL 35007

PERIOD OF EXISTENCE OF DEBTS

DEBTOR'S NAME

A/AGASCO

#20 20TH ST

BIRMINGHAM

Furnace 2 1/2 ton furnace

GMS80703AN

100901377

3138.00

1. FILING OFFICE USE ONLY	2. FILING OFFICE USE ONLY	3. FILING OFFICE USE ONLY	4. FILING OFFICE USE ONLY	5. FILING OFFICE USE ONLY	6. FILING OFFICE USE ONLY	7. FILING OFFICE USE ONLY	8. FILING OFFICE USE ONLY	9. FILING OFFICE USE ONLY	10. FILING OFFICE USE ONLY
---------------------------	---------------------------	---------------------------	---------------------------	---------------------------	---------------------------	---------------------------	---------------------------	---------------------------	----------------------------

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

1. NAME & PHONE OF CONTACT AT FILER (optional)

2. SEND A PAYMENT TO (Name and Address)

Alagasco
#20 20TH ST
Birmingham AL

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

3. DEBTOR'S EXACT FULL LEGAL NAME (do not abbreviate; do not include "Inc." or "Corp.")

4. DEBTOR'S SOCIAL SECURITY NAME

Wilson

5. FIRST NAME

Bobbie

6. MIDDLE NAME

7. MAIL ADDRESS

PO Box 1120

8. CITY

Alabaster

9. STATE

AL 35007

10. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME (do not abbreviate; do not include "Inc." or "Corp.")

11. TYPE OF ORGANIZATION

12. DEBTOR

13. FULL FUNCTION OF ORGANIZATION

14. ORGANIZATION'S PHONE

15. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME (do not abbreviate; do not include "Inc." or "Corp.")

16. DEBTOR'S SOCIAL SECURITY NAME

17. FIRST NAME

18. MIDDLE NAME

19. MAIL ADDRESS

20. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME (do not abbreviate; do not include "Inc." or "Corp.")

21. TYPE OF ORGANIZATION

22. DEBTOR

23. FULL FUNCTION OF ORGANIZATION

24. ORGANIZATION'S PHONE

25. SECURED PARTY'S NAME (if NAME of TOTAL ASSIGNEE or ASSIGNOR, do not insert only one secured party name; do not include "Inc." or "Corp.")

26. SECURED PARTY'S SOCIAL SECURITY NAME

Alagasco

27. FIRST NAME

28. MIDDLE NAME

29. MAIL ADDRESS

#20 20TH ST

30. CITY

Birmingham

31. STATE

32. IF THIS FINANCING STATEMENT covers the following collateral:

Furnace 2 1/2 ton furnace
GMS80703AN
100901377

33. ALTERNATIVE DESIGNATION (if applicable):	LESSEE/LESSOR	CONSIGNEE/CONSIGNOR	BAILEE/BAILO	SELLER/BUYER	AS TEND	MONITOR/PLING
34. THIS FINANCING STATEMENT is to be filed (for record, for recording) in the REAL ESTATE RECORDS. Attach Addendum (if applicable)	7. Check to REQUEST SEARCH REPORT (for Debtor's ADDITIONAL FEE)	8. Check to REQUEST SEARCH REPORT (for Debtor's ADDITIONAL FEE)	9. Check to REQUEST SEARCH REPORT (for Debtor's ADDITIONAL FEE)	10. Check to REQUEST SEARCH REPORT (for Debtor's ADDITIONAL FEE)	11. Check to REQUEST SEARCH REPORT (for Debtor's ADDITIONAL FEE)	12. Check to REQUEST SEARCH REPORT (for Debtor's ADDITIONAL FEE)
35. ORIGINAL FILER REFERENCE DATA						

20101115000382250 3/3 \$35.80
Shelby Cnty Judge of Probate, AL
11/15/2010 01:25:28 PM FILED/CERT

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT

9a. ORGANIZATION'S NAME			
OR			
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX	
Wilson	Bobby		

10. MISCELLANEOUS:

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (11a or 11b) - do not abbreviate or combine names

11a. ORGANIZATION'S NAME				
OR				
11b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
11c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
PO BOX 1120 955th Ave SE	Alabaster	AL	35007	
11d. TAX ID #: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	11e. TYPE OF ORGANIZATION	11f. JURISDICTION OF ORGANIZATION	11g. ORGANIZATIONAL ID #, if any
				☐ NONE

12. ☐ ADDITIONAL SECURED PARTY'S or ☐ ASSIGNOR S/P'S NAME - insert only one name (12a or 12b)

12a. ORGANIZATION'S NAME	Freeman			
OR				
12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
12c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
630 20th St	Bessemer	AL	35020	

13. This FINANCING STATEMENT covers ☐ timber to be cut or ☐ as-extracted collateral, or is filed as a ☐ fixture filing.

14. Description of real estate:

Lot 1 A of
Birch Creek Subdivision
Resurvey of lot 1 + 2
Map Book 29
Page 118

15. Name and address of a RECORD OWNER of above-described real estate (if Debtor does not have a record interest):

16. Additional collateral description:

17. Check only if applicable and check only one box.

Debtor is a ☐ Trust or ☐ Trustee acting with respect to property held in trust or ☐ Decedent's Estate

18. Check only if applicable and check only one box.

- ☐ Debtor is a TRANSMITTING UTILITY
☐ Filed in connection with a Manufactured-Home Transaction — effective 30 years
☐ Filed in connection with a Public-Finance Transaction — effective 30 years