JCC FINANCING STATEMENT AMENDMEN	<b>JT</b>					
OLLOW INSTRUCTIONS (front and back) CAREFULLY  A. NAME & PHONE OF CONTACT AT FILER [optional]  J. RUFFIN/205.226.1902						
B. SEND ACKNOWLEDGMENT TO: (Name and Address)						
AT ADAMA DOWED COMBANIA	<del></del>			070000008740 1/1 \$. Cnty Judge of Pro		
I ALABAMA POWER COMPANY 600 NORTH 18TH STREET	•		_	2011 03:27:07 PM F		
BIRMINGHAM, AL 35203						
		THE ABOVE SPACE	CE IS FOR	R FILING OFFICE USE C	NLY	
a. INITIAL FINANCING STATEMENT FILE# 20100527000168150/SHE				1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS.		
2. X TERMINATION: Effectiveness of the Financing Statement identified above	is terminated with respect to	security interest(s) of the Se	cured Party	y authorizing this Termination	Statement.	
3. CONTINUATION: Effectiveness of the Financing Statement identified about continued for the additional period provided by applicable law.	ove with respect to security	interest(s) of the Secured F	Party author	rizing this Continuation State	ement is	
4. 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 a	ssignor in it	em 9.		
		of record. Check only one				
Also check one of the following three boxes and provide appropriate information in					····	
CHANGE name and/or address: Give current record name in item 6a or 6b; also name (if name change) in item 7a or 7b and/or new address (if address change)	so give new DELETI e) in item 7c. to be de	E name: Give record name eleted in item 6a or 6b.	iten	Diname: Complete item 7a o 7c; also complete items 7d-	r 7b, and also ·7g (if applicable)	
6a. ORGANIZATION'S NAME		· · ·				
6b. INDIVIDUAL'S LAST NAME	FIRST NAME		MODUE	IAME	SUFFIX	
CHIRCIPI			MIDDLE N			
SINKFIELD	FRANK		MIDDLE N		JR.	
			MIDDLE			
7. CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME	FRANK			I À NACE	JR.	
7. CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE N	IAME		
7. CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  SINKFIELD	FRANK		MIDDLE N	NAME POSTAL CODE	JR.	
7. CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  SINKFIELD	FIRST NAME RONETTA		MIDDLE N A. STATE		JR.	
7. CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  SINKFIELD  7c. MAILING ADDRESS  108 CAMBRIDGE LANE	FIRST NAME RONETTA CITY	- <u>·</u>	MIDDLE N A. STATE AL	POSTAL CODE	SUFFIX	
7. CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  SINKFIELD  7c. MAILING ADDRESS  108 CAMBRIDGE LANE  7d. TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TYPE OF ORGANIZATION ORGANIZATION	FRANK  FIRST NAME  RONETTA  CITY  ALABASTER	- <u>·</u>	MIDDLE N A. STATE AL	POSTAL CODE 35007	SUFFIX	
7. CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  SINKFIELD  7c. MAILING ADDRESS  108 CAMBRIDGE LANE  7d. TAX ID #: SSN OR EIN   ADD'L INFO RE ORGANIZATION ORGANIZATION DEBTOR	FIRST NAME RONETTA CITY ALABASTER 7f. JURISDICTION OF C	PRGANIZATION	MIDDLE N A. STATE AL	POSTAL CODE 35007	JR.	
7. CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  SINKFIELD  7c. MAILING ADDRESS  108 CAMBRIDGE LANE  7d. TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR   AMENDMENT (COLLATERAL CHANGE): check only one box.	FIRST NAME RONETTA CITY ALABASTER 7f. JURISDICTION OF C	PRGANIZATION	MIDDLE N A. STATE AL	POSTAL CODE 35007	SUFFIX	
7. CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  SINKFIELD  7c. MAILING ADDRESS  108 CAMBRIDGE LANE  7d. TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR   AMENDMENT (COLLATERAL CHANGE): check only one box.	FIRST NAME RONETTA CITY ALABASTER 7f. JURISDICTION OF C	PRGANIZATION	MIDDLE N A. STATE AL	POSTAL CODE 35007	SUFFIX	
7. CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  SINKFIELD  7c. MAILING ADDRESS  108 CAMBRIDGE LANE  7d. TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR    8. AMENDMENT (COLLATERAL CHANGE): check only one box.	FIRST NAME RONETTA CITY ALABASTER 7f. JURISDICTION OF C	PRGANIZATION	MIDDLE N A. STATE AL	POSTAL CODE 35007	SUFFIX	
7. CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  SINKFIELD  6. MAILING ADDRESS  108 CAMBRIDGE LANE  6. TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR    8. AMENDMENT (COLLATERAL CHANGE): check only one box.	FIRST NAME RONETTA CITY ALABASTER 7f. JURISDICTION OF C	PRGANIZATION	MIDDLE N A. STATE AL	POSTAL CODE 35007	SUFFIX	
C. CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  SINKFIELD  c. MAILING ADDRESS  108 CAMBRIDGE LANE  d. TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR    6. AMENDMENT (COLLATERAL CHANGE): check only one box.	FIRST NAME RONETTA CITY ALABASTER 7f. JURISDICTION OF C	PRGANIZATION	MIDDLE N A. STATE AL	POSTAL CODE 35007	SUFFIX	
C. CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  SINKFIELD  c. MAILING ADDRESS  108 CAMBRIDGE LANE  d. TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR    6. AMENDMENT (COLLATERAL CHANGE): check only one box.	FIRST NAME RONETTA CITY ALABASTER 7f. JURISDICTION OF C	PRGANIZATION	MIDDLE N A. STATE AL	POSTAL CODE 35007	SUFFIX	
7. CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  SINKFIELD  6. MAILING ADDRESS  108 CAMBRIDGE LANE  6. TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR    8. AMENDMENT (COLLATERAL CHANGE): check only one box.	FIRST NAME RONETTA CITY ALABASTER 7f. JURISDICTION OF C	PRGANIZATION	MIDDLE N A. STATE AL	POSTAL CODE 35007	SUFFIX	
7. CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  SINKFIELD  c. MAILING ADDRESS  108 CAMBRIDGE LANE  d. TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR    6. AMENDMENT (COLLATERAL CHANGE): check only one box.	FIRST NAME RONETTA CITY ALABASTER 7f. JURISDICTION OF C	PRGANIZATION	MIDDLE N A. STATE AL	POSTAL CODE 35007	SUFFIX	
7. CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  SINKFIELD  6. MAILING ADDRESS  108 CAMBRIDGE LANE  6. TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR    7b. INDIVIDUAL'S LAST NAME  SINKFIELD  6. AMBRIDGE LANE  7c. TYPE OF ORGANIZATION ORGANIZATION ORGANIZATION DEBTOR    7c. AMENDMENT (COLLATERAL CHANGE): check only one box.  Describe collateral   deleted or   added, or give entire   restated collate	FIRST NAME RONETTA CITY ALABASTER 7f. JURISDICTION OF CO	DRGANIZATION  collateral assigned.	MIDDLE NA. STATE AL 7g. ORGA	POSTAL CODE 35007  NIZATIONAL ID #, if any	SUFFIX  COUNTRY  NON	
CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  SINKFIELD  c. MAILING ADDRESS  108 CAMBRIDGE LANE  d. TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR    c. AMENDMENT (COLLATERAL CHANGE): check only one box.  Describe collateral   deleted or   added, or give entire   restated collate	FRANK  FIRST NAME RONETTA  CITY ALABASTER  7f. JURISDICTION OF C	PRGANIZATION  collateral assigned.	MIDDLE NA. STATE AL 7g. ORGA	an Amendment authorized by	SUFFIX COUNTRY	
. CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  SINKFIELD  c. MAILING ADDRESS  108 CAMBRIDGE LANE  d. TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TYPE OF ORGANIZATION   DEBTOR    . AMENDMENT (COLLATERAL CHANGE): check only one box.  Describe collateral   deleted or   added, or give entire   restated collate  Personal Collateral   restated collate   restated collate    NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AN adds collateral or adds the authorizing Debtor, or if this is a Termination authorized    9a. ORGANIZATION'S NAME	FRANK  FIRST NAME RONETTA  CITY ALABASTER  7f. JURISDICTION OF C	PRGANIZATION  collateral assigned.	MIDDLE NA. STATE AL 7g. ORGA	an Amendment authorized by	SUFFIX COUNTRY	
7. CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  SINKFIELD  7c. MAILING ADDRESS  108 CAMBRIDGE LANE  7d. TAX ID #: SSN OR EIN   ADD'L INFO RE ORGANIZATION ORGANIZATION DEBTOR    8. AMENDMENT (COLLATERAL CHANGE): check only one box.  Describe collateral   deleted or   added, or give entire   restated collate  7b. NAME of SECURED PARTY of RECORD AUTHORIZING THIS AM adds collateral or adds the authorizing Debtor, or if this is a Termination authorized and organization's NAME  9a. ORGANIZATION'S NAME  ALABAMA POWER COMPANY	FRANK  FIRST NAME RONETTA CITY ALABASTER 7f. JURISDICTION OF Control of the contr	pnor, if this is an Assignment and enter name of DEBT	MIDDLE NA. STATE AL 7g. ORGA OR author	POSTAL CODE 35007  NIZATIONAL ID #, if any  an Amendment authorized by izing this Amendment.	SUFFIX  COUNTRY  NONE	
7. CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  SINKFIELD  7c. MAILING ADDRESS  108 CAMBRIDGE LANE  7d. TAX ID #: SSN OR EIN   ADD'L INFO RE   ORGANIZATION   ORGANIZATION   DEBTOR  8. AMENDMENT (COLLATERAL CHANGE): check only one box.  Describe collateral   deleted or   added, or give entire   restated collate  7 or sive entire   restated collate  7 or if this is a Termination authorized  9 a. ORGANIZATION'S NAME	FRANK  FIRST NAME RONETTA  CITY ALABASTER  7f. JURISDICTION OF C	pnor, if this is an Assignment and enter name of DEBT	MIDDLE NA. STATE AL 7g. ORGA	POSTAL CODE 35007  NIZATIONAL ID #, if any  an Amendment authorized by izing this Amendment.	SUFFIX COUNTRY	