UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] J. RUFFIN/205.226.1902			20110124000024520 1/1 \$.00		
 	SMENT TO: (Name and Address)		Shelby Cnty Judge of Prob 01/24/2011 03:12:17 PM FI	ate. Al	
ALABAMA	POWER COMPANY				
	18TH STREET				
BIRMINGH	AM, AL 35203				
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<u> </u>		THE AD			
INITIAL FINANCING STA	- -		OVE SPACE IS FOR FILING OFFICE I		
	20070705000316720/SH		to be filed [for record] (or r		
CONTINUATION: E	fectiveness of the Financing Statement identified abov	e is terminated with respect to security interest	(s) of the Secured Party authorizing this Term	nination Statement	
continued for the addi	Effectiveness of the Financing Statement identified a tional period provided by applicable law.	above with respect to security interest(s) of the	e Secured Party authorizing this Continuation	n Statement is	
ASSIGNMENT (full	or partial): Give name of assignee in item 7a or 7b ar	nd address of assignee in item 7c; and also give	e name of assignor in item 9		
AMENDMENT (PART			ck only <u>one</u> of these two boxes.		
	wing three boxes and provide appropriate information	in items 6 and/or 7.			
name (ir name change	address: Give current record name in item 6a or 6b; a in item 7a or 7b and/or new address (if address chan	also give new DELETE name: Give re ige) in item 7c. to be deleted in item 6a		m 7a or 7b, and al ms 7d-7g (if applic	
CURRENT RECORD IN 6a. ORGANIZATION'S N					
6b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
JORDAN		JIM			
7a. ORGANIZATION'S N	DDED INFORMATION:	· · · · · · · · · · · · · · · · · · ·			
7b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
JORDAN		ANGELA	KIM		
MAILING ADDRESS 238 VILLAGE DR		CALEDA	STATE POSTAL CODE	COUNTR	
TAX ID #: SSN OR EIN	ADD'L INFO RE 7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	AL 35040		
	ORGANIZATION DEBTOR	THE STATE OF THE S	7g. ORGANIZATIONAL ID #, if a	ny	
	TERAL CHANGE): check only one box.				
MENDMEN! (COLLA	eted or added, or give entire restated collat	teral description, or describe collateral as	ssigned.		
	The state of the s	, , , , , , , , , , , , , , , , , , , ,			
AME OF SECURED	PARTY OF RECORD AUTHORIZING THIS AN	MENDMENT (name of assignor, if this is an A	ssignment). If this is an Amendment authoriz	ed by a Debtor wh	
AME OF SECURED	PARTY OF RECORD AUTHORIZING THIS ANd authorizing Debtor, or if this is a Termination authorized	MENDMENT (name of assignor, if this is an A	ssignment). If this is an Amendment authorize of DEBTOR authorizing this Amendment.	ed by a Debtor wh	
IAME OF SECURED dds collateral or adds the a	ME	MENDMENT (name of assignor, if this is an A	ssignment). If this is an Amendment authorize of DEBTOR authorizing this Amendment.	ed by a Debtor wh	
NAME OF SECURED dds collateral or adds the a	WER COMPANY	MENDMENT (name of assignor, if this is an And by a Debtor, check here and enter name	ssignment). If this is an Amendment authorize of DEBTOR authorizing this Amendment.	ed by a Debtor wh	