ALABAMA	GMENT TO: (Name and Address)  A POWER COMPANY RIS SHINSTOCK	20			
	Sh.	20110428000128850 1/4 \$40.05 Shelby Cnty Judge of Probate, AL 04/28/2011 02:16:25 PM FILED/CERT			
		THE ABOVE	SPACE IS FO	OR FILING OFFICE US	E ONLY
	FULL LEGAL NAME - insert only one debtor name (1				
1a. ORGANIZATION'S I	NAME.				
R 1b. INDIVIDUAL'S LAST	NAME	FIRST NAME	MIDDLE NAME		SUFFIX
SAXON		VALERIE	M		
MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTR
17731 HIGHWAY	7 55	STERRETT	AL	35147	
TAX ID #: SSN OR EIN	ORGANIZATION	1f. JURISDICTION OF ORGANIZATION	1g. ORG	ANIZATIONAL ID #, if any	
	DEBTOR				<b>                                    </b>
ADDITIONAL DEBTO	R'S EXACT FULL LEGAL NAME - insert only one	debtor name (2a or 2b) - do not abbreviate or comb	ine names		X
2a. ORGANIZATION'S N	R'S EXACT FULL LEGAL NAME - insert only one	debtor name (2a or 2b) - do not abbreviate or comb	ine names		<u>×</u>
2a. ORGANIZATION'S N	R'S EXACT FULL LEGAL NAME - insert only one	debtor name (2a or 2b) - do not abbreviate or comb	ine names  MIDDLE	NAME	SUFFIX
2a. ORGANIZATION'S N	R'S EXACT FULL LEGAL NAME - insert only one			NAME	
2a. ORGANIZATION'S N  2b. INDIVIDUAL'S LAST  SAXON	R'S EXACT FULL LEGAL NAME - insert only one	FIRST NAME		NAME POSTAL CODE	SUFFIX
2a. ORGANIZATION'S N  2b. INDIVIDUAL'S LAST  SAXON  MAILING ADDRESS	OR'S EXACT FULL LEGAL NAME - insert only one	FIRST NAME CHARLES	MIDDLE		
2a. ORGANIZATION'S N	OR'S EXACT FULL LEGAL NAME - insert only one NAME  NAME	FIRST NAME  CHARLES  CITY	MIDDLE N STATE AL	POSTAL CODE	SUFFIX
2a. ORGANIZATION'S N  2b. INDIVIDUAL'S LAST  SAXON  MAILING ADDRESS  7731 HIGHWAY  TAX ID #: SSN OR EIN	PR'S EXACT FULL LEGAL NAME - insert only one NAME  NAME  ADD'L INFO RE   2e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR	FIRST NAME CHARLES CITY STERRETT 2f. JURISDICTION OF ORGANIZATION	MIDDLE N STATE AL 2g. ORG	POSTAL CODE 35147	SUFFIX
2a. ORGANIZATION'S N  2b. INDIVIDUAL'S LAST  SAXON  MAILING ADDRESS  7731 HIGHWAY  TAX ID #: SSN OR EIN  SECURED PARTY'  3a. ORGANIZATION'S N	PR'S EXACT FULL LEGAL NAME - insert only one NAME  NAME  ADD'L INFO RE   2e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR   20 TOTAL ASSIGNEE of ASSIGNO NAME	FIRST NAME CHARLES CITY STERRETT 2f. JURISDICTION OF ORGANIZATION	MIDDLE N STATE AL 2g. ORG	POSTAL CODE 35147	SUFFIX
2a. ORGANIZATION'S No. 2b. INDIVIDUAL'S LAST SAXON  MAILING ADDRESS  7731 HIGHWAY  TAX ID #: SSN OR EIN  SECURED PARTY'  3a. ORGANIZATION'S No. ALABAMA PO. 25	PR'S EXACT FULL LEGAL NAME - insert only one NAME  NAME  NAME  ADD'L INFO RE   2e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR  S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNO NAME  OWER COMPANY	FIRST NAME CHARLES CITY STERRETT 2f. JURISDICTION OF ORGANIZATION	MIDDLE N STATE AL 2g. ORG	POSTAL CODE 35147	SUFFIX
2a. ORGANIZATION'S No. 2b. INDIVIDUAL'S LAST SAXON  MAILING ADDRESS  7731 HIGHWAY TAX ID #: SSN OR EIN  SECURED PARTY'  3a. ORGANIZATION'S NO. ALABAMA PO.	PR'S EXACT FULL LEGAL NAME - insert only one NAME  NAME  NAME  ADD'L INFO RE   2e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR  S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNO NAME  OWER COMPANY	FIRST NAME CHARLES CITY STERRETT 2f. JURISDICTION OF ORGANIZATION	MIDDLE N STATE AL 2g. ORG	POSTAL CODE  35147  ANIZATIONAL ID #, if any	SUFFIX
2a. ORGANIZATION'S No. 2b. INDIVIDUAL'S LAST SAXON  MAILING ADDRESS  7731 HIGHWAY  TAX ID #: SSN OR EIN  SECURED PARTY'  3a. ORGANIZATION'S NO. ALABAMA PORTAL	PR'S EXACT FULL LEGAL NAME - insert only one NAME  NAME  NAME  ADD'L INFO RE   2e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR  S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNO NAME  OWER COMPANY	FIRST NAME CHARLES CITY STERRETT 2f. JURISDICTION OF ORGANIZATION  R S/P) - insert only one secured party name (3a or 3	MIDDLE N STATE AL 2g. ORG	POSTAL CODE  35147  ANIZATIONAL ID #, if any	SUFFIX

M# RHLL-HM3617JA S# W031117398

			<u></u>	· · · · · · · · · · · · · · · · · · ·				
5. ALTERNATIVE DESIGNATION [if applicable]:	LESSEE/LESSOR	CONSIGNEE/	CONSIGNOR	BAILEE/BAILOR	SELLER/BUYER	AG. LIEN	NON-UC	CC FILING
This FINANCING STATEMENT is to be filed [ ESTATE RECORDS. Attach Addendum	for record] (or recorded) in	the REAL [if applicable]	7. Check to REQUINCTIONAL	JEST SEARCH REPOR	RT(S) on Debtor(s) [optional]	All Debtors	Debtor 1	Debtor 2
8. OPTIONAL FILER REFERENCE DATA								
4700	0.00							

p <sup>2</sup>	r 1b) ON RELATED FINANCING STA	TEMENT			
9a. ORGANIZATION'S NAME					
9b. INDIVIDUAL'S LAST NAME SAXON	FIRST NAME VALERIE	MIDDLE NAME,SUFFIX M			
0. MISCELLANEOUS:			Shelby C	000128850 2/4 \$- nty Judge of Pri 11 02:16:25 PM	obate, AL
	T FULL LEGAL NAME - insert only <u>one</u> n	ame (11a or 11b) - do not abbreviat	THE ABOVE SPACE te or combine names	IS FOR FILING OFFI	CE USE ONLY
11a. ORGANIZATION'S NAME					
11b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	NAME	SUFFIX
1c. MAILING ADDRESS	······	CITY	STATE	POSTAL CODE	COUNTRY
1d. TAX ID #: SSN OR EIN ADD'L INFO ORGANIZA DEBTOR	i i	11f. JURISDICTION OF ORGANIZ	ZATION 11g. ORG	GANIZATIONAL ID #, if a	
2. ADDITIONAL SECURED PA	ARTY'S or ASSIGNOR S/P'S	NAME - insert only <u>one</u> name (1	2a or 12b)		NON
PR 12b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	NAME	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
3. This FINANCING STATEMENT covers collateral, or is filed as a fixture file.  4. Description of real estate:  THE REAL PROPERTY DIATTACHED DEED.	ing.	16. Additional collateral description	on:		
<ol> <li>Name and address of a RECORD OWN (if Debtor does not have a record interest)</li> </ol>					
		4 7 -			
		17. Check only if applicable and on the Debtor is a Trust or Trust 18. Check only if applicable and on the trust of the tr	stee acting with respect to p	roperty held in trust or	Decedent's Estat

MAY-20-2002 MON 10:21 AM

FAX NO. 18007338387

P. 02

20020630000264120 Pm 1/2 14.50 Shelby Chty Judge of Probate, AL 05/30/2002 08:24:00 FILED/CERTIFIED

This Instrument was Prepared by:

R. Shan Paden, Esq.
PADEN & PADEN
Attorneys at Law
5 Riverchase Ridge, Suite 100
Birmingham, Alabama 35244
(205) 987-7210

STATE OF ALABAMA)
COUNTY OF SHELBY)

SEND TAX NOTICE TO:

VALERIE M. SAXON 17731HIGHWAY 55 STERRETT, AL. 35147



20110428000128850 3/4 \$40.05 Shelby Cnty Judge of Probate, AL 04/28/2011 02:16:25 PM FILED/CERT

## QUIT CLAIM DEED

Know All Mon by These Presents: That in consideration of FIVE HUNDRED AND NO/100THS (\$500.00) DOLLARS, the undersigned GRANTORS, VALERIE M. SAXON AND CHARLES N. SAXON, HUSBAND AND WIFE, in hand paid by VALERIE M. SAXON AND CHARLES N. SAXON, HUSBAND AND WIFE GRANTEE herein, the receipt of which is hereby acknowledged. ORANTORS do by these presents, grant, bargain, sell and convey unto the GRANTEE all of their right, title, and undivided Interest in the following described real estate, kituated in SHELBY COUNTY, Alabama, to-wit:

A PART OF THE SW 1/4 OF SECTION 19, TOWNSHIP 18 SOUTH, RANGE 2 EAST, AND DESCRIBED AS FOLLOWS:

COMMENCE AT THE NE CORNER OF THE NW 1/4 OF SW 1/4 OF SAID SECTION; THENCE SOUTH ALONG THE EAST LINE OF SAME A DISTANCE OF 20.00 FEET TO THE POINT OF REGINNING; THENCE SOUTH 34 DEGREES 05' FAST A DISTANCE OF 309.55 FEET TO THE RIGHT OF WAY OF A PUBLIC ROAD; THENCE SOUTH 38 DEGREES 32 MINUTES WEST ALONG SAID RIGHT OF WAY A DISTANCE OF 103.79 FEET; THENCE SOUTH 42 DEGREES 23 MINUTES WEST A DISTANCE OF 100.19 FEET; THENCE SOUTH 47 DEGREES 46 MINUTES WEST A DISTANCE OF 119.35 FEET; THENCE NORTH 37 DEGREES 18' WEST A DISTANCE OF 353.47 FEET TO THE POINT OF BEGINNING.

ALSO AN EASEMENT OFF THE EAST END OF THE ABOVE DESCRIBED PROPERTY, AND DESCRIBED AS FOLLOWS: COMMENCE AT THE NE CORNER OF THE NW 1/4 OF THE SW 1/4, OF SAID SECTION 19; THENCE SOUTH ALONG THE EAST LINE OF SAME 20.00 FEET TO THE POINT OF BEGINNING OF EASEMENT; THENCE SOUTH 34 DEGREES 05' EAST 309.55 FEET TO THE RIGHT OF WAY LINE OF A PUBLIC ROAD; THENCE SOUTH 38' DEGREES 32' WEST ALONG SAID RIGHT OF WAY 53.00 FEET; THENCE NORTH 34 DEGREES 05' WEST 45.00 FEET; THENCE NORTH 12 DEGREES 22' EAST 28.30 FEET; THENCE NORTH 34 DEGREES 18' EAST 32.27 FEET TO THE POINT OF BEGINNING. SITUATED IN SHELDY COUNTY, ALABAMA.

Subject to the existing easements, restrictions, set-back lines, rights of way, and limitations, if any, of record.

VALERIEM. SCALES AND VALERIEM. SAXON ARE ONE IN THE SAME PERSON.

FAX NO. 18007338987

MAY-20-2002 MON 10:21 AM

P. 03

20020530000254120 Pg 2/2 14.50 Shelby Cnty Judge of Probate.AL 05/30/2002 68:24:00 FILED/CERTIFIED

TO HAVE AND TO HOLD Unto the said GRANTEE, Their heirs and assigns, forever. In Witness Whereof, the said GRANTORS, VALERIE M. SAXON and CHARLES N. SAXON, HUSBAND AND WIFE have hereunto scytheir signature and sean this the 13th day of MAY, 2002.

VALERIE M. SAXON

CHARLES N. SAXON

STATE OF ALABAMA) AT LANGE
COUNTY OF SHELBY

## **ACKNOWLEDGMENT**

I, THE UNDERSIGNED, a Notary Public, in and for said County, in said State, hereby curify that VALERIE M. SAXON AND CHARLES N. SAXON, HUSBAND AND WIFE whose names are signed to the foregoing conveyance, and who are known to me, acknowledged before me on this day that, being informed of the contents of the conveyance they executed the same voluntarily on the day the same bears date.

Given under my hand this the 13th day of MAY, 2002.

Notary Public

My commission expires: 6-8-02-

20110428000128850 4/4 \$40.05 20110428000128850 4/4 \$40.05 Shelby Cnty Judge of Probate, AL 04/28/2011 02:16:25 PM FILED/CERT