CC FINANCING STATEMENT AME LLOW INSTRUCTIONS (front and back) CAREFULLY NAME & PHONE OF CONTACT AT FILER (optional) RUFFIN/205.226.1902 SEND ACKNOWLEDGMENT TO: (Name and Address) ALABAMA POWER COMPANY 600 NORTH 18TH STREET BIRMINGHAM, AL 35203	NDMENT	20110428000128870 1/1 \$.00 Shelby Cnty Judge of Proba 04/28/2011 02:16:27 PM FIL	
. INITIAL FINANCING STATEMENT FILE#		HE ABOVE SPACE IS FOR FILING OFFICE 1b. This FINANCING STATES to be filed (for record) (or	MENT AMENDMENT
	93790/SHELBY	to be filed [for record] (or REAL ESTATE RECORDS	S.
★ TERMINATION: Effectiveness of the Financing Statement CONTINUATION: Effectiveness of the Financing Statement			
continued for the additional period provided by applicable law		ter e decared i dity deliterang and communic	
ASSIGNMENT (full or partial): Give name of assignee in it	em 7a or 7b and address of assignee in item 7c; and	also give name of assignor in item 9.	
AMENDMENT (PARTY INFORMATION): This Amendment Also check one of the following three boxes and provide appropriate		ord. Check only one of these two boxes.	
CHANGE name and/or address: Give current record name in name (if name change) in item 7a or 7b and/or new address (i CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME	item 6a or 6b; also give new DELETE name:	Give record name ADD name: Complete ite item 6a or 6b. Item 7c; also complete ite	em 7a or 7b, and also ems 7d-7g (if applica
6b. INDIVIDUAL'S LAST NAME GILLILAND	FIRST NAME ROBERT	MIDDLE NAME	SUFFIX
	KOBEKI	Α.	
		A.	
CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME	FIRST NAME	MIDDLE NAME	SUFFIX
CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME GILLILAND	FIRST NAME ELIZABETH	MIDDLE NAME R.	
CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME GILLILAND MAILING ADDRESS	FIRST NAME ELIZABETH CITY	MIDDLE NAME R. STATE POSTAL CODE	
CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME GILLILAND MAILING ADDRESS 216 FAIRVIEW CIR TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF OR ORGANIZATION DEBTOR	FIRST NAME ELIZABETH CITY MONTEVALLO GANIZATION 7f. JURISDICTION OF ORGANI	MIDDLE NAME R. STATE POSTAL CODE AL 35115	any
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