SCURLOCK  C. MAILING ADDRESS  CITY  OF STATE POSTAL CODE  COUNTY  VINCENT  AL 35178  T. TAX ID #: SSN OR EIN ADD'L INFO RE ORGANIZATION ORGANIZATION  71. JURISDICTION OF ORGANIZATION  72. ORGANIZATIONAL ID #, if any ORGANIZATION  73. ORGANIZATIONAL ID #, if any ORGANIZATION  74. JURISDICTION OF ORGANIZATION  75. JURISDICTION OF ORGANIZATION  76. JURISDICTION OF ORGANIZATION  77. JURISDICTION OF ORGANIZATION  78. ORGANIZATIONAL ID #, if any ORGANIZATION		onal]		
ATTN: ROD NOWLIN POST OFFICE BOX 129 ANNISTON, AL 36202  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY ANNISTON, AL 36202  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  In This FINANCING STATEMENT FILE #  20110603000163880  TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continued for the additional period provided by applicable law.  AMENDMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in item 7a; and also give name of assignor in item 9.  AMENDMENT (PARTY INFORMATION): This Amendment affects Debtor or Secured Party authorizing this Continuation Statement is accorded by the following these boxes and provided appropriate information in items 6 and/or 7.  GHANGE name and/or address; Give current record name in item 6 and for 7.  GHANGE name and/or address; Give current record name in item 6 and for 7.  GHANGE name and/or address; Give current record name in item 6 and for 7.  GHANGE name and/or address; Give current record name in item 6 and for 7.  GHANGE name and/or address; Give current record name in item 6 and for 7.  GRANIZATIONS NAME  RE INDIVIDUAL'S LAST NAME  SCURLOCK  PARTY INFORMATION:  AL 35178  SUFF  To INDIVIDUAL'S LAST NAME  SCURLOCK  MIDDLE NAME  SUFF  To INDIVIDUAL'S LAST NAME  SCURLOCK  MIDDLE NAME  SUFF  To INDIVIDUAL'S LAST NAME  SUFF  To INDIVID	3. SEND ACKNOWLEDGMENT TO: (Name and A	(ddress)		
ATTN: ROD NOWLIN POST OFFICE BOX 129 ANNISTON, AL 36202  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  a. INITIAL FINANCING STATEMENT FILE#  20110603000163880  TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement is continued for the additional period provided by applicable law.  ASSIGNMENT (full or partial): Give name of assigner in item 7a or 7b and address of assigner in item 7c, and also give name of assignor in item 9.  ASSIGNMENT (full or partial): Give name of assigner in item 7a or 7b and address of assigner in item 7c, and also give name of assignor in item 9.  ASSIGNMENT (full or partial): Give name of assigner in item 7a or 7b and address of assigner in item 7c, and also give name of assignor in item 9.  ASSIGNMENT (full or partial): Give name of assigner in item 7a or 7b and address of assigner in item 7c, and also give name of assignor in item 9.  ASSIGNMENT (full or partial): Give name of assigner in item 7a or 7b and address of assigner in item 7c, and also give name of assignor in item 9.  ASSIGNMENT (full or partial): Give name of assigner in item 7a or 7b and address. Give name of andre address. Give current record name in items 6a and/or 7.  ASSIGNMENT (full or partial): Give name of address. Give current record name in items 6a and/or 7.  CHANGE name and/or address. Give current record name in items 6a and/or 7.  CHANGE name and/or address. Give current record name in item 6a or 6b, also give new  BILLY  Table (FIRST NAME  BILLY  Table (FIRST NAME  SUFF  CHANGE (INTRO ADDED INFORMATION:  FIRST NAME  BILLY  Table (FIRST NAME  SUFF  CHANGE (INTRO ADDED INFORMATION:  Table (FIRST NAME  SUFF  Table	ALARAMA POWER COMPAN		20110901000258470	
ANNISTON, AL 36202    THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY	ATTN: ROD NOWLIN		POLICE CONTRACTOR AND AND ADMINISTRAL PROPERTY OF THE PROPERTY	
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TON HEIL HEAT PUMP MODEL# N4H336AKE100	CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  SCURLOCK  MAILING ADDRESS  665 SCURLOCK RANCH RD  TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TYP ORGANIZATION DEBTOR  AMENDMENT (COLLATERAL CHANGE): check Describe collateral   deleted or   added, or give   deleted   added, or give   deleted   added   deleted   deleted   added   deleted   added   deleted   deleted   added   deleted   added   deleted   added   deleted   added   deleted   deleted   added   added	FIRST NAME  KAREN  CITY  VINCENT  E OF ORGANIZATION  7f. JURISDICTION OF ORG  only one box.	STATE POSTAL COLA AL 35178  ANIZATION 7g. ORGANIZATIONAL	DE COUNTR USA ID #, if any
TON HEIL HEAT PUMP MODEL# N4H336AKE100 SERIAL # E111402170	CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  SCURLOCK  MAILING ADDRESS  665 SCURLOCK RANCH RD  TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TYP ORGANIZATION DEBTOR    AMENDMENT (COLLATERAL CHANGE): check Describe collateral   deleted or   added, or give  3 TON HEIL HEAT PUMP  MODEL# N4H336AKE100  SERIAL # E111402170	FIRST NAME  KAREN  CITY  VINCENT  E OF ORGANIZATION  7f. JURISDICTION OF ORG  only one box.	STATE POSTAL COLA AL 35178  ANIZATION 7g. ORGANIZATIONAL	DE COUNTR USA ID #, if any
TON HEIL HEAT PUMP MODEL# N4H336AKE100 SERIAL # E111402170 MODEL# FEM4P3600AT1	CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  SCURLOCK  MAILING ADDRESS  665 SCURLOCK RANCH RD  TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TYPORGANIZATION   DEBTOR  AMENDMENT (COLLATERAL CHANGE): check   Describe collateral   deleted or   added, or give    3 TON HEIL HEAT PUMP   MODEL# N4H336AKE100   SERIAL # E111402170   MODEL# FEM4P3600AT1	FIRST NAME  KAREN  CITY  VINCENT  E OF ORGANIZATION  7f. JURISDICTION OF ORG  only one box.	STATE POSTAL COLA AL 35178  ANIZATION 7g. ORGANIZATIONAL	DE COUNTR USA ID #, if any
TON HEIL HEAT PUMP MODEL# N4H336AKE100 SERIAL # E111402170 MODEL# FEM4P3600AT1	CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  SCURLOCK  MAILING ADDRESS  665 SCURLOCK RANCH RD  TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TYPORGANIZATION   DEBTOR  AMENDMENT (COLLATERAL CHANGE): check   Describe collateral   deleted or   added, or give    3 TON HEIL HEAT PUMP   MODEL# N4H336AKE100   SERIAL # E111402170   MODEL# FEM4P3600AT1	FIRST NAME  KAREN  CITY  VINCENT  E OF ORGANIZATION  7f. JURISDICTION OF ORG  only one box.	STATE POSTAL COLA AL 35178  ANIZATION 7g. ORGANIZATIONAL	DE COUNTR USA ID #, if any
TON HEIL HEAT PUMP MODEL# N4H336AKE100 SERIAL # E111402170 MODEL# FEM4P3600AT1	CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  SCURLOCK  MAILING ADDRESS  665 SCURLOCK RANCH RD  TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TYPORGANIZATION   DEBTOR  AMENDMENT (COLLATERAL CHANGE): check   Describe collateral   deleted or   added, or give    8 TON HEIL HEAT PUMP   MODEL# N4H336AKE100   SERIAL # E111402170   MODEL# FEM4P3600AT1	FIRST NAME  KAREN  CITY  VINCENT  E OF ORGANIZATION  7f. JURISDICTION OF ORG  only one box.	STATE POSTAL COLA AL 35178  ANIZATION 7g. ORGANIZATIONAL	DE COUNTR USA ID #, if any
B TON HEIL HEAT PUMP MODEL# N4H336AKE100 SERIAL # E111402170 MODEL# FEM4P3600ATI SERIAL # A111368121	CHANGED (NEW) OR ADDED INFORMATION:    7a. ORGANIZATION'S NAME     7b. INDIVIDUAL'S LAST NAME     SCURLOCK     MAILING ADDRESS     665 SCURLOCK RANCH RD     TAX ID #: SSN OR EIN   ADD'L INFO RE     ORGANIZATION     DEBTOR     AMENDMENT (COLLATERAL CHANGE): check     Describe collateral   deleted or   added, or give     3 TON HEIL HEAT PUMP     MODEL# N4H336AKE100     SERIAL # E111402170     MODEL# FEM4P3600AT1     SERIAL # A111368121	FIRST NAME KAREN  CITY VINCENT  E OF ORGANIZATION 7f. JURISDICTION OF ORG  only one box. entire restated collateral description, or describe coll	MIDDLE NAME  STATE POSTAL COL AL 35178  ANIZATION 7g. ORGANIZATIONAL  ateral assigned.	DE COUNTRUSA  ID #, if any
TON HEIL HEAT PUMP MODEL# N4H336AKE100 SERIAL # E111402170  MODEL# FEM4P3600AT1 SERIAL # A111368121  NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor	CHANGED (NEW) OR ADDED INFORMATION:    Ta. ORGANIZATION'S NAME     Tb. INDIVIDUAL'S LAST NAME     SCURLOCK     MAILING ADDRESS     665 SCURLOCK RANCH RD     TAX ID #: SSN OR EIN   ADD'L INFO RE     ORGANIZATION     DEBTOR     AMENDMENT (COLLATERAL CHANGE): check     Describe collateral   deleted or   added, or give     3 TON HEIL HEAT PUMP     MODEL# N4H336AKE100     SERIAL # E111402170     MODEL# FEM4P3600AT1     SERIAL # A111368121     NAME OF SECURED PARTY OF RECORD AU	FIRST NAME KAREN  CITY VINCENT  E OF ORGANIZATION 7f. JURISDICTION OF ORG  only one box. entire restated collateral description, or describe coll  THORIZING THIS AMENDMENT (name of assignor,	STATE POSTAL COLAL 35178  ANIZATION 7g. ORGANIZATIONAL ateral assigned.	DE COUNTRUSA  ID #, if any
B TON HEIL HEAT PUMP MODEL# N4H336AKE100 SERIAL # E111402170  MODEL# FEM4P3600AT1 SERIAL # A111368121  NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor	CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  SCURLOCK  MAILING ADDRESS  665 SCURLOCK RANCH RD  TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TYP ORGANIZATION DEBTOR    AMENDMENT (COLLATERAL CHANGE): check Describe collateral   deleted or   added, or give  3 TON HEIL HEAT PUMP  MODEL# N4H336AKE100  SERIAL # E111402170  MODEL# FEM4P3600AT1  SERIAL # A111368121  NAME OF SECURED PARTY OF RECORD AU adds collateral or adds the authorizing Debtor, or if this is	FIRST NAME KAREN  CITY VINCENT  E OF ORGANIZATION 7f. JURISDICTION OF ORG  only one box. entire restated collateral description, or describe coll  THORIZING THIS AMENDMENT (name of assignor,	STATE POSTAL COLAL 35178  ANIZATION 7g. ORGANIZATIONAL ateral assigned.	DE COUNTRUSA  ID #, if any
3 TON HEIL HEAT PUMP MODEL# N4H336AKE100 SERIAL # E111402170 MODEL# FEM4P3600AT1 SERIAL # A111368121  NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here and enter name of DEBTOR authorizing this Amendment.	CHANGED (NEW) OR ADDED INFORMATION:    7a. ORGANIZATION'S NAME     7b. INDIVIDUAL'S LAST NAME     SCURLOCK     MAILING ADDRESS     665 SCURLOCK RANCH RD     TAX ID #: SSN OR EIN   ADD'L INFO RE     ORGANIZATION     DEBTOR     AMENDMENT (COLLATERAL CHANGE): check     Describe collateral   deleted or   added, or give     3 TON HEIL HEAT PUMP     MODEL# N4H336AKE100     SERIAL # E111402170     MODEL# FEM4P3600AT1     SERIAL # A111368121     NAME OF SECURED PARTY OF RECORD AU     adds collateral or adds the authorizing Debtor, or if this is     9a. ORGANIZATION'S NAME	FIRST NAME KAREN  CITY VINCENT  E OF ORGANIZATION 7f. JURISDICTION OF ORG  only one box. entire restated collateral description, or describe coll  THORIZING THIS AMENDMENT (name of assignor,	STATE POSTAL COLAL 35178  ANIZATION 7g. ORGANIZATIONAL ateral assigned.	DE COUNTRUSA  ID #, if any
ALABAMA POWER	CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME  R  7b. INDIVIDUAL'S LAST NAME  SCURLOCK  MAILING ADDRESS  665 SCURLOCK RANCH RD  TAX ID #: SSN OR EIN ADD'L INFO RE ORGANIZATION DEBTOR  AMENDMENT (COLLATERAL CHANGE): check Describe collateral deleted or added, or give  3 TON HEIL HEAT PUMP  MODEL# N4H336AKE100  SERIAL # E111402170  MODEL# FEM4P3600AT1  SERIAL # A111368121  NAME OF SECURED PARTY OF RECORD AU adds collateral or adds the authorizing Debtor, or if this is  9a. ORGANIZATION'S NAME  ALABAMA POWER	FIRST NAME KAREN  CITY VINCENT  E OF ORGANIZATION 7f. JURISDICTION OF ORG  only one box.  entire restated collateral description, or describe coll  THORIZING THIS AMENDMENT (name of assignor, a Termination authorized by a Debtor, check here are	MIDDLE NAME  STATE POSTAL COL AL 35178  ANIZATION 7g. ORGANIZATIONAL  if this is an Assignment). If this is an Amendment d enter name of DEBTOR authorizing this Amer	DE COUNTRUSA  ID #, if any

UCC FINANCING STATEMENT AMENDMENT ADDENDUM!

TOLLOW INSTRUCTIONS (front and back) CAREFULLY

11. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form)

20110603000163880

12. NAME OF PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form)

12a. ORGANIZATION'S NAME

ALABAMA POWER

12b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME, SUFFIX

13. Use this space for additional information

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

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