UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY				
A. NAME & PHONE OF CONTACT AT FILER [optional]				
TIFFANY MCVAY (251) 275-4111				
B. SEND ACKNOWLEDGMENT TO: (Name and Address)				
FIRST UNITED SECURITY BANK P.O. BOX 249	201202030000 Shelby Cnty 02/03/2012	Judge of	\$29.00 Probate, AL M FILED/CERT	
THOMASVILLE, AL 36784				
	THE ABOVE S	SPACE IS FO	R FILING OFFICE USE	ONLY
1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name			<del></del>	
1a. ORGANIZATION'S NAME			····	<del></del>
OR REYNOLDS WOOD PRODUCTS INC				
1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
· · · · · · · · · · · · · · · · · · ·				
1c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
PO BOX 197	MAPLESVILLE	AL	36750-0197	USA
1d. TAX ID #: SSN OR EIN ADD'L INFO RE 1e. TYPE OF ORGANIZATION ORGANIZATION	1f. JURISDICTION OF ORGANIZATION	1g. ORG	ANIZATIONAL ID #, if any	
DEBTOR CORPORATION  2 ADDITIONAL DEDTOR/C EVACTORILL LEGAL MARKET	ALABAMA	· ·		NONE
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only of the control of the	ne debtor name (2a or 2b) - do not abbrev	viate or comb	oine names	······································
OR	FIRST NAME	MIDDLE	NAME	SUFFIX
			A A IVIC	JOHN
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
2d. TAX ID #: SSN OR EIN ADD'L INFO RE 2e. TYPE OF ORGANIZATION ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORG	ANIZATIONAL ID #, if any	
3 SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNED ASSIGNED				NONE
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR 3a. ORGANIZATION'S NAME	S/P) - Insert only one secured party name (3a or 3	3D)		····
FIRST UNITED SECURITY BANK				
OR TIRDI ONTIED SECORTIT BANK  3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	VAME	SUFFIX
3c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
P.O. BOX 249	THOMASVILLE	AL	36784	USA
4. This FINANCING STATEMENT covers the following collateral:				
ASSIGNMENT OF TIMBER CUTTING RIGHTS ON ALL MERCHA PINE AND HARDWOOD TREES TO BE CUT NOW STANDING, LY OR BEING ON THE FOLLOWING DESCRIBED LAND LOCATED SHELBY COUNTY, BETWEEN REYNOLDS WOOD PRODUCTS AND THOMAS S DENNEY. PROPERTY LOCATED IN THE N1/2 OF T NW1/4 OF S14 AND S1/2 OF SW1/4 OF S11, TOWNSHIP 20 SOUTH, RANGE 1 WEST IN SHELBY COUNTY, ALABAMA.	IN 'HE			
	AL TO Check to REQUEST SEARCH REPORTS	SELLER/BUYE		NON-UCC FILING
6. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the READSTATE RECORDS. Attach Addendum  [if applicates]  8. OPTIONAL FILER REFERENCE DATA	AL 7. Check to REQUEST SEARCH REPORT(Stable) [ADDITIONAL FEE] [C	S) on Debtor(s) optional]	All Debtors Debt	tor 1 Debtor 2
8500066				

OR	9a. ORGANIZATION'S NAME	ON RELATED FINANCING S	STATEMEN	Γ 				
}	REYNOLDS WOOD PROD	UCTS INC						
	9b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE NAME, SUFFIX				
	MISCELLANEOUS:							
O. II	VIIOCELLANEOUS.				E.1 1	. 16 6 6 1 <b>2 1 5 6 6 7 1 1 1</b>	12 22 23 24 24 24 24 25 25 25 25 25 25 25 25 25 25 25 25 25	
							00042420 2/2 \$29 ty Judge of Prob	
					2	01202030	00042420 272 323 ty Judge of Prob	cate, AL
					S (2	2/03/201	ty Judge of Fio. 2 01:10:03 PM F	ILED/OLK.
1. /	ADDITIONAL DEBTOR'S EXACT	FULL LEGAL NAME - insert	only one na	me (11a or 11b) - do n			IS FOR FILING OFFI	CE USE ONLY
	11a. ORGANIZATION'S NAME		<u> </u>		ot abbievia(c	OI COIIIDIII		· <del>-</del> · · · · · · · · · · · · · · · · · · ·
OR		<u>,                                     </u>	- <b>-</b>			<u></u>		
	11b. INDIVIDUAL'S LAST NAME		FIRS	NAME		MIDDLE 1	NAME	SUFFIX
11c.	MAILING ADDRESS	· · · · · · · · · · · · · · · · · · ·	CITY		···	STATE	POSTAL CODE	COUNTRY
			•					
l 1d.	TAX ID #: SSN OR EIN ADD'L INFO R		ON 11f.	JURISDICTION OF ORGANI	ZATION	11g. ORG	SANIZATIONAL ID #, if	any
	ORGANIZATIO DEBTOR	ON I					SANIZATIONAL ID #, if	any
2.	ORGANIZATIO	ON I		JURISDICTION OF ORGANIS			SANIZATIONAL ID #, if	·
2.	ORGANIZATION DEBTOR  ADDITIONAL SECURED PAR	ON I					SANIZATIONAL ID #, if	·
2. OR	ORGANIZATION DEBTOR  ADDITIONAL SECURED PAR	ON I	R S/P'S N					·
2. OR	ORGANIZATION DEBTOR  ADDITIONAL SECURED PAR  12a. ORGANIZATION'S NAME  12b. INDIVIDUAL'S LAST NAME	ON I	R S/P'S N	AME - insert only <u>one</u> r		12b)	NAME	SUFFIX
2. OR	ORGANIZATION DEBTOR  ADDITIONAL SECURED PAR  12a. ORGANIZATION'S NAME	ON I	R S/P'S N	AME - insert only <u>one</u> r		12b)		
2. 2c.	ORGANIZATION DEBTOR  ADDITIONAL SECURED PAR  12a. ORGANIZATION'S NAME  12b. INDIVIDUAL'S LAST NAME	RTY'S or ASSIGNOR	R S/P'S N	AME - insert only <u>one</u> r	name (12a or	12b)	NAME	SUFFIX
2. OR .	ORGANIZATION  ADDITIONAL SECURED PAR  12a. ORGANIZATION'S NAME  12b. INDIVIDUAL'S LAST NAME  MAILING ADDRESS  This FINANCING STATEMENT covers [: collateral, or is filed as a	RTY'S or ASSIGNOR  Itimber to be cut or as-ext	R S/P'S N	AME - insert only <u>one</u> r	name (12a or	12b)	NAME	SUFFIX
2. Co.	ORGANIZATION  ADDITIONAL SECURED PAR  12a. ORGANIZATION'S NAME  12b. INDIVIDUAL'S LAST NAME  MAILING ADDRESS  This FINANCING STATEMENT covers [: collateral, or is filed as a	RTY'S or ASSIGNOR  It imber to be cut or as-ext ag.	R S/P'S N	AME - insert only <u>one</u> r	name (12a or	12b)	NAME	SUFFIX
2. Control 2c.	ORGANIZATION  ADDITIONAL SECURED PAR  12a. ORGANIZATION'S NAME  12b. INDIVIDUAL'S LAST NAME  MAILING ADDRESS  This FINANCING STATEMENT covers [: collateral, or is filed as a	RTY'S or ASSIGNOR  It imber to be cut or as-extended a	R S/P'S N	AME - insert only <u>one</u> r	name (12a or	12b)	NAME	SUFFIX
2. Control	ORGANIZATION  ADDITIONAL SECURED PAR  12a. ORGANIZATION'S NAME  12b. INDIVIDUAL'S LAST NAME  MAILING ADDRESS  This FINANCING STATEMENT covers [: collateral, or is filed as a	RTY'S or ASSIGNOR  It imber to be cut or as-ext ag.  1/2 OF THE OF SW 1/4 OF	R S/P'S N	AME - insert only <u>one</u> r	name (12a or	12b)	NAME	SUFFIX

FILING OFFICE COPY -- NATIONAL UCC FINANCING STATEMENT ADDENDUM (FORM UCC1Ad) (REV. 07/29/98)

17. Check only if applicable and check only one box.

Debtor is a Trust or Trustee acting with respect to property held in trust or Decedent's Estate

Filed in connection with a Manufactured-Home Transaction -- effective 30 years

Filed in connection with a Public-Finance Transaction -- effective 30 years

18. Check only if applicable and check only one box.

Debtor is a TRANSMITTING UTILITY