B. SEND ACKNOWLEDGMENT TO: (Name	CAREFULLY R [optional] 1-800-858-5294	NT					
Corporation Service Com 801 Adlai Stevenson Driv Springfield, IL 62703-426	e ·		201202060 Shelby Co	0000453 hty Jud	60 1/1 \$29.00 ge of Probate: AL 7:21 PM FILED/CER	-	
<u></u>	Filed In: Alabar	na Shelby	THE ABOVE CD	40F 10 F	00 EN 1110 0		
a. INITIAL FINANCING STATEMENT FILE # 20070515000226270 5/15/2007			INC ABOVE SP	1b. Ti	OR FILING OFFICE US	TAMENO	MENT
	icing Statement identified above	is terminated with respect t			be filed [for record] (or reco		
TERMINATION: Effectiveness of the Finance. CONTINUATION: Effectiveness of the Finance continued for the additional period provided by	nancing Statement identified ab	ove with respect to security	nterest(s) of the Secure	Secured P	arty authorizing this Terminal	tion State	ment
	——————————————————————————————————————					iatement i	5
AMENDMENT (DARTY INCORMATION)	of assignee in item 7a or 7b and						···
AMENDMENT (PARTY INFORMATION): Also check one of the following three boxes and present the following three boxes are the following three boxes and present the following three boxes are the followi			y of record. Check only o	ne of these	two boxes.		, -1
CHANGE name and/or address: Please refer to the	ne detailed instructions	DELETE name: Give	e record name		name: Complete item 7a or 7b	and also	item 7c
in regards to changing the name/address of a particular CURRENT RECORD INFORMATION:	ty.	to be deleted in item	6a or 6b.	also	complete items 7e-7g (if applications)	able).	item /c
6a. ORGANIZATION'S NAME BRANTLE	Y HOMES INC	······································			<u> </u>		
D							
66. INDIVIDUAL'S LAST NAME		FIRST NAME	 	MIDDLE	NAME	SUFF	FIX
CHANGED (NEW) OR ADDED INFORMATION	√ :						- :- <u>-</u>
7a. ORGANIZATION'S NAME						· •••	<u> </u>
75. INDIVIDUAL'S LAST NAME		FIRST NAME		· · · · · · · · · · · · · · · · · · ·			
		FIRST NAME		MIDDLE	NAME	SUFF	ΙX
MAILING ADDRESS	······································	CITY		CTATE	TROCTAL BOOK		
				STATE	POSTAL CODE	COUN	NTRY
SEE INSTRUCTIONS ADD'L INFO RE 7e.	TYPE OF ORGANIZATION	7f. JURISDICTION OF O	RGANIZATION	7a. ORG	ANIZATIONAL ID #, if any		<u> </u>
ORGANIZATION ' DEBTOR					The state of the s	r	-
AMENDMENT (COLLATERAL CHANGE): c	heck only one box.						NO
Describe collateral deleted or added, or	give entirerestated conlatera	il description, or describe o	collateral assigned.				
AME OF SECTIOES DADTY OF BECOME							
AME OF SECURED PARTY OF RECORD	AUTHORIZING THIS AME	NDMENT (name of assignative a Debtor, check have	or, if this is an Assignment)	If this is a	n Amendment authorized by	a Debtor	which
IAME OF SECURED PARTY OF RECORD dds collateral or adds the authorizing Debtor, or if the second sec	ns is a Terrification authorized b	y a Debtor, check here	or, if this is an Assignment) and enter name of DEBT(. If this is a	in Amendment authorized by zing this Amendment	a Debtor	which
IAME OF SECURED PARTY OF RECORD dds collateral or adds the authorizing Debtor, or if the second sec	ns is a Terrification authorized b	y a Debtor, check here	or, if this is an Assignment) and enter name of DEBT(. If this is a	in Amendment authorized by zing this Amendment	a Debtor	which

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