

# UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional] M. Lee Johnsey, Jr. (205) 251-8100
B. SEND ACKNOWLEDGMENT TO: (Name and Address)  M. Lee Johnsey, Jr. Balch & Bingham LLP P. O. Box 306 Birmingham, AL 35201-0306



20120605000196220 1/1 \$29.00  
Shelby Cnty Judge of Probate, AL  
06/05/2012 08:43:53 AM FILED/CERT

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE # 20070807000368750	1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. <input checked="" type="checkbox"/>	
2. <input type="checkbox"/> TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement.		
3. <input type="checkbox"/> CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law.		
4. <input type="checkbox"/> ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in item 7c; and also give name of assignor in item 9.		
5. AMENDMENT (PARTY INFORMATION): This Amendment affects <input type="checkbox"/> Debtor or <input checked="" type="checkbox"/> Secured Party of record. Check only <u>one</u> of these two boxes. Also check <u>one</u> of the following three boxes and provide appropriate information in items 6 and/or 7. <input checked="" type="checkbox"/> CHANGE name and/or address: Give current record name in item 6a or 6b; also give new name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c. <input type="checkbox"/> DELETE name: Give record name to be deleted in item 6a or 6b. <input type="checkbox"/> ADD name: Complete item 7a or 7b, and also item 7c; also complete items 7d-7g (if applicable).		
6. CURRENT RECORD INFORMATION:		
6a. ORGANIZATION'S NAME Regions Bank, as Trustee		
OR	6b. INDIVIDUAL'S LAST NAME	
	FIRST NAME	
	MIDDLE NAME	
	SUFFIX	
7. CHANGED (NEW) OR ADDED INFORMATION:		
7a. ORGANIZATION'S NAME Regions Bank, as Trustee		
OR	7b. INDIVIDUAL'S LAST NAME	
	FIRST NAME	
	MIDDLE NAME	
	SUFFIX	
7c. MAILING ADDRESS	CITY	
1901 Sixth Ave. N. Suite 2800, Attn: Corporate Trust Dept	Birmingham	
STATE	POSTAL CODE	COUNTRY
AL	35202	usa
ADD'L INFO RE ORGANIZATION DEBTOR	7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION
		7g. ORGANIZATIONAL ID #, if any
		<input checked="" type="checkbox"/> NONE
8. AMENDMENT (COLLATERAL CHANGE): check only <u>one</u> box. Describe collateral <input type="checkbox"/> deleted or <input type="checkbox"/> added, or give entire <input type="checkbox"/> restated collateral description, or describe collateral <input type="checkbox"/> assigned.		

9. 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 which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here <input type="checkbox"/> and enter name of DEBTOR authorizing this Amendment.			
9a. ORGANIZATION'S NAME Regions Bank, as Trustee			
OR	9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME
			SUFFIX
10. OPTIONAL FILER REFERENCE DATA to be filed in Shelby County, Alabama (Regions / Turtle Apartments)			