Rely 11.20

UCC FINANCING STATEMENT

| FOLLOW INSTRUCTIONS (front and back) CAREFULLY | |
|--|--|
| A. NAME & PHONE OF CONTACT AT FILER [optional] | |
| B. SEND ACKNOWLEDGMENT TO: (Name and Address) | |
| | |
| | |
| ALABAMA GAS CORPORATION | |
| 605 RICHARD ARRINGTON JR BLVD N | |
| BIRMINGHAM, AL 35203 | |
| | |

20121022000403920 1/2 \$36.50 Shelby Cnty Judge of Probate, AL 10/22/2012 11:45:25 AM FILED/CERT

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names 1a. ORGANIZATION'S NAME SUFFIX MIDDLE NAME FIRST NAME 1b. INDIVIDUAL'S LAST NAME JR **JAMES** CRAWFORD COUNTRY POSTAL CODE STATE CITY 1c. MAILING ADDRESS 35242-6643 US BIRMINGHAM 1045 BELVEDERE CV 1g. ORGANIZATIONAL ID #, if any 1f. JURISDICTION OF ORGANIZATION ADD'L INFO RE 1e. TYPE OF ORGANIZATION **ORGANIZATION** NONE DEBTOR 2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names 2a. ORGANIZATION'S NAME SUFFIX OR 2b. INDIVIDUAL'S LAST NAME MIDDLE NAME FIRST NAME POSTAL CODE COUNTRY STATE CITY 2c. MAILING ADDRESS 2g. ORGANIZATIONAL ID #, if any 2f. JURISDICTION OF ORGANIZATION ADD'L INFO RE | 2e. TYPE OF ORGANIZATION **ORGANIZATION** NONE DEBTOR 3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b) 3a. ORGANIZATION'S NAME ALABAMA GAS CORPORATION OR 3b. INDIVIDUAL'S LAST NAME SUFFIX MIDDLE NAME FIRST NAME COUNTRY POSTAL CODE STATE CITY 3c. MAILING ADDRESS AL 35203 US BIRMINGHAM 605 RICHARD ARRINGTON JR BLVD N

4. This FINANCING STATEMENT covers the following collateral:

AMERICAN STANDARD A/C MODEL #4TTB3042D1000BA SERIAL #12401LSA3F

AMERICAN STANDARD COIL MODEL #4TXCB042BCX3HCBA SERIAL #123750GX5G

\$5000.00

| | | | | | | · · · · · · · · · · · · · · · · · · · |
|---|---------------------------------------|-------------------------------|------------------|-------------------------------|-------------|---------------------------------------|
| 5. ALTERNATIVE DESIGNATION [if applicable]: | LESSEE/LESSOR | CONSIGNEE/CONSIGNOR | BAILEE/BAILOR | SELLER/BUYER | AG. LIEN | NON-UCC FILING |
| 6. This FINANCING STATEMENT is to be filed | for record) (or recorded) | in the REAL 7. Check to REC | UEST SEARCH REPO | RT(S) on Debtor(s) [optional] | All Debtors | Debtor 1 Debtor 2 |
| 8 OPTIONAL FILER REFERENCE DATA | · · · · · · · · · · · · · · · · · · · | III applicable[IAODITIONAL | | | | <u></u> |

| 9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT 9a. ORGANIZATION'S NAME | | | | | | | |
|---|-----------------------------------|--|--------------------------|-------------------------------------|--|---|--|
| OR 9b. INDIVIDUAL'S LAST NAME | FIRST NAME | MIDDLE NAME, SUFFIX | | | | | |
| CRAWFORD | JAMES | W, JR | | | | | |
| 10. MISCELLANEOUS: | | | | | | | |
| | | | 2012 Shell | 0220004 by Chty | 103920 2/2 \$36.5 Judge of Probat 11:45:25 AM FILE | 50 te, AL | |
| | | | THE ABOV | E SPACE | IS FOR FILING OFFI | CE USE ONLY | |
| 11. ADDITIONAL DEBTOR'S EXACT 11a. ORGANIZATION'S NAME | FULL LEGAL NAME - insert only one | name (11a or 11b) - do not abbrev | iate or combine nan | nes | | · - · · · · · · · · · · · · · · · · · · | |
| TTA. OROANIZATION S NAIVIL | | | | | | | |
| OR 11b. INDIVIDUAL'S LAST NAME | | FIRST NAME | | MIDDLE | NAME | SUFFIX | |
| | | | | | | | |
| 11c. MAILING ADDRESS | | CITY | | STATE | POSTAL CODE | COUNTRY | |
| | | | | | | | |
| ADD'L INFO ORGANIZAT | | 11f. JURISDICTION OF ORGAI | NIZATION | ON 11g. ORGANIZATIONAL ID #, if any | | | |
| DEBTOR | TT/10 // A COLONION O/DIO | | | | | NON | |
| 2. ADDITIONAL SECURED PAR 12a, ORGANIZATION'S NAME | RTY'S or ASSIGNOR S/P'S | NAME - insert only <u>one</u> name | (12a or 12b) | | | | |
| TOTAL COMFORT | | | | | | | |
| 12b. INDIVIDUAL'S LAST NAME | | FIRST NAME | | MIDDLE | NAME | SUFFIX | |
| | , | | . , | | | | |
| 12c. MAILING ADDRESS 230 OXMOOR CIR, STE 11 | 01 | HOMEWOOD | | STATE | POSTAL CODE 35209 | COUNTRY | |
| | | <u> </u> | | <u> </u> | 33203 | US | |
| 3. This FINANCING STATEMENT covers collateral, or is filed as a fixture filing. 4. Description of real estate: | timber to be cut or as-extracted | 16. Additional collateral descri | ption: | | | | |
| 1045 BELVEDERE CV BIRMINGHAM, AL 35242-6643 | | | | | | | |
| Legal Description PRIMARY LOT 9 BELVEDERE COVE PHASE OF SECTION 34 TOWNSHIP 185 MAP BOOK 35 MAP PAGE 45 PARCEL #03 8 34 0 016 009.00 SHELBY COUNTY, ALABAMA | RANGE 01W | | | | | | |
| Name and address of a RECORD OWNE (if Debtor does not have a record interest) | | 17. Check only if applicable and Debtor is a Trust or Tr | | | operty held in trust or | Decedent's Estate | |
| | | 18. Check only if applicable and | check <u>only</u> one bo | X. | | | |
| | | Debtor is a TRANSMITTING | | | | | |
| | | Filed in connection with a N | fanufactured-Home | Transaction | — effective 30 years | | |
| | | Filed in connection with a Public-Finance Transaction — effective 30 years | | | | | |