

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS



20150824000293360 1/3 \$33.00  
Shelby Cnty Judge of Probate, AL  
08/24/2015 11:54:45 AM FILED/CERT

A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-800-858-5294
B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscinfo.com
C. SEND ACKNOWLEDGMENT TO: (Name and Address)  99581932 - 336190 Corporation Service Company 801 Adlai Stevenson Drive Springfield, IL 62703  Filed In: Alabama (Shelby)

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here ☐ and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME	The Crossroads at Greystone, LLC			
OR	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS	820 Shades Creek Parkway, Suite 1200	CITY Birmingham	STATE AL	POSTAL CODE 35209
			COUNTRY USA	

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here ☐ and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME				
OR	2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
				COUNTRY

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME	Genworth Life Insurance Company			
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS	6620 West Broad Street, Building 1	CITY Richmond	STATE VA	POSTAL CODE 23230
			COUNTRY USA	

4. COLLATERAL: This financing statement covers the following collateral:

Includes Fixtures, As-Extracted Collateral, and Timber to be Cut.

5. Check only if applicable and check only one box: Collateral is ☐ held in a Trust (see UCC1Ad, item 17 and Instructions) ☐ being administered by a Decedent's Personal Representative

6a. Check only if applicable and check only one box:

☐ Public-Finance Transaction ☐ Manufactured-Home Transaction ☐ A Debtor is a Transmitting Utility

6b. Check only if applicable and check only one box:

☐ Agricultural Lien ☐ Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable): ☐ Lessee/Lessor ☐ Consignee/Consignor ☐ Seller/Buyer ☐ Bailee/Bailor ☐ Licensee/Licensors

8. OPTIONAL FILER REFERENCE DATA: 500004728/GW/LKR

99581932



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## UCC FINANCING STATEMENT ADDENDUM

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9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here ☐

9a. ORGANIZATION'S NAME

The Crossroads at Greystone, LLC

OR

9b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

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10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c

10a. ORGANIZATION'S NAME

OR

10b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

10c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

11. ☐ ADDITIONAL SECURED PARTY'S NAME or ☐ ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

11a. ORGANIZATION'S NAME

OR

11b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

11c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):

13. ☒ This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)

14. This FINANCING STATEMENT:

☐ covers timber to be cut

☐ covers as-extracted collateral

☒ is filed as a fixture filing

15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):

16. Description of real estate:

Legal Description attached Exhibit A

17. MISCELLANEOUS:

EXHIBIT A

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Parcel 1

Lot 1A, according to a Resurvey of Lots 1 and 2, The Crossroad at Greystone, as recorded in Map Book 29 page 53, in the Probate Office of Shelby County, Alabama; being situated in Shelby County, Alabama.

Parcel 2

All beneficial, non-exclusive easement rights set out in the Greystone Commercial Declaration of Covenants, Conditions and Restrictions recorded in Real Volume 314 page 506, amended by the 1<sup>st</sup> Amendment recorded as Inst. No. 1996-00531 and amended by the 2<sup>nd</sup> Amendment recorded as Inst. No. 1996-00532, and amended by the 3<sup>rd</sup> Amendment recorded as Inst. No. 2000-38942 all recorded in the Probate Office of Shelby County, Alabama.

Parcel 3

Non-exclusive easement rights for ingress and egress as set out in the Reciprocal Easement Agreement dated January 1<sup>st</sup> 1998 by and between Baptist Health System, Inc. and Dantract Inc. and Charles W. Daniel recorded in Inst. No. 1999-07730, amended by Inst. No. 2001-7233 in the Probate Office of Shelby County, Alabama.

Parcel 4

Non-exclusive drainage easement as set out in the Declaration of Drainage Easement dated September 9, 2002 by The Crossroads at Greystone, LLC and recorded as Inst. No. 20020911000436070 in the Probate Office of Shelby County, Alabama.

Parcel 5

Cross-Easement as to Lot 2-A, according to a Resurvey of Lots 1 and 2, The Crossroads at Greystone, as recorded in Map Book 29 page 53, in the Probate Office of Shelby County, Alabama, as set out in the Declaration of Access Easement dated September 9, 2002 by The Crossroads at Greystone, LLC and recorded as Inst. No. 20020911000436080 in the Probate Office of Shelby County, Alabama.