

LLOW INSTRUCTIONS (front and back) CAREFULLY NAME & PHONE OF CONTACT AT FILER [optional]				
INDY THOMAS 205-326-8299	· · · · · · · · · · · · · · · · · · ·			
SEND ACKNOWLEDGMENT TO: (Name and Address)	——————————————————————————————————————			
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ALABAMA GAS CORPORATION 2101 6TH AVE NORTH	ON 201	60421000131280	1/1 \$.00 f Drobate, AL	
BIRMINGHAM, AL 35203	She	elby Cnty Judge	of Probate, AL 35 PM FILED/CERT	•
•	Q4 :	/21/2010 01.10.		
		BOVE SDACE IS FO	R FILING OFFICE US	F ONLY
INITIAL FINANCING STATEMENT FILE #	ITEA	1b. This	FINANCING STATEMEN	T AMENDMENT
20070626000298400			to be filed [for record] (or recorded) in the REAL ESTATE RECORDS.	
TERMINATION: Effectiveness of the Financing Statement ide	entified above is terminated with respect to security interes	est(s) of the Secured Part	y authorizing this Termina	tion Statement.
CONTINUATION: Effectiveness of the Financing Statemen		the Secured Party author	rizing this Continuation S	itatement is
continued for the additional period provided by applicable law.			<u> </u>	
ASSIGNMENT (full or partial): Give name of assignee in iten				
AMENDMENT (PARTY INFORMATION): This Amendment		theck only <u>one</u> of these t	wo boxes.	
Also check one of the following three boxes and provide appropriate CHANGE name and/or address: Give current record name in ite	em 6a or 6b; also give new DELETE name: Give	e record name	D name: Complete item 7	a or 7b, and also
name (if name change) in item 7a or 7b and/or new address (if a	address change) in item 7c to be deleted in item	6a or 6biter	n 7c; also complete items	7d-7g (if applicab
CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME	· · · · · · · · · · · · · · · · · · ·			
6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	MIDDLE NAME SUF	
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CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME	FIRST NAME			
CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME MAILING ADDRESS	FIRST NAME CITY	STATE	POSTAL CODE	COUNTRY
CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME . MAILING ADDRESS 483 SECRETARIAT DR	FIRST NAME CITY HELENA	STATE	POSTAL CODE 35080-4138	COUNTRY
CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME . MAILING ADDRESS 483 SECRETARIAT DR ADD'L INFO RE 7e. TYPE OF ORGANIZATION	FIRST NAME CITY HELENA	STATE	POSTAL CODE	COUNTRY
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