



20251217000386210  
12/17/2025 03:14:42 PM  
UCC1 1/2

UCC FINANCING STATEMENT  
FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) <b>JANET HOLLOWAY</b>
B. E-MAIL CONTACT AT FILER (optional) <b>LOANS@SPIREENERGY.COM</b>
C. SEND ACKNOWLEDGMENT TO: (Name and Address) <div><div><div><div></div><div></div></div><div><b>SPIRE ALABAMA INC. 605 RICHARD ARRINGTON JR BLVD N BIRMINGHAM, AL 35203</b></div><div><div></div><div></div></div></div></div>

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)

OR	1a. ORGANIZATION'S NAME				
	1b. INDIVIDUAL'S SURNAME <b>DURHAM</b>	FIRST PERSONAL NAME <b>STEVENSON</b>	ADDITIONAL NAME(S)/INITIAL(S) <b>JEROME</b>	SUFFIX	
1c. MAILING ADDRESS <b>1126 CARIBBEAN CIR</b>		CITY <b>ALABASTER</b>	STATE <b>AL</b>	POSTAL CODE <b>35007</b>	COUNTRY <b>US</b>

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)

OR	2a. ORGANIZATION'S NAME				
	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)

OR	3a. ORGANIZATION'S NAME <b>SPIRE ALABAMA INC.</b>				
	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
3c. MAILING ADDRESS <b>605 RICHARD ARRINGTON JR BLVD N</b>		CITY <b>BIRMINGHAM</b>	STATE <b>AL</b>	POSTAL CODE <b>35203</b>	COUNTRY <b>US</b>

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

**RINNAI TANKLESS WATER HEATER**

**Model#: RX199-IN                      Serial#: TCBA-056778**

**\$3,450**

5. Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is <input type="checkbox"/> held in a Trust (see UCC1Ad, item 17 and Instructions) <input type="checkbox"/> being administered by a Decedent's Personal Representative					
6a. Check <u>only</u> if applicable and check <u>only</u> one box: <input type="checkbox"/> Public-Finance Transaction <input type="checkbox"/> Manufactured-Home Transaction <input type="checkbox"/> A Debtor is a Transmitting Utility			6b. Check <u>only</u> if applicable and check <u>only</u> one box: <input type="checkbox"/> Agricultural Lien <input type="checkbox"/> Non-UCC Filing		
7. ALTERNATIVE DESIGNATION (if applicable): <input type="checkbox"/> Lessee/Lessor <input type="checkbox"/> Consignee/Consignor <input type="checkbox"/> Seller/Buyer <input type="checkbox"/> Bailee/Bailor <input type="checkbox"/> Licensee/Licensors					
8. OPTIONAL FILER REFERENCE DATA:					

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

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

OR

9b. INDIVIDUAL'S SURNAME

DURHAM

FIRST PERSONAL NAME

STEVENSON

ADDITIONAL NAME(S)/INITIAL(S)

JEROME

SUFFIX

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

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):  
  



Filed and Recorded  
Official Public Records  
Judge of Probate, Shelby County Alabama, County Clerk  
Shelby County, AL  
12/17/2025 03:14:42 PM  
\$44.25 BRITTANI  
20251217000386210

Allen S. Boyd

16. Description of real estate:  
  
1126 Caribbean Cir,  
Alabaster, AL 35007  
  
Legal Description:  
Subdivision: SOUTHWIND 1ST SECTOR  
Book: 06 Page: 072 Block: 3 Lot: 12  
Section: 10 Township: 21S Range: 03W  
Parcel#: 23 2 10 1 007 070.000  
  
Shelby County, Alabama

17. MISCELLANEOUS: