5:11-bk-70293 Doc#: 1 Filed: 01/26/11 Entered: 01/26/11 14:21:11 Page 1 of 12

B1 (Official Form 1)(4/10)										
U	nited S West			ruptcy f Arkans					Voluntary	Petition
Name of Debtor (if individual, enter Northwest Health & Lifestyl					Name	of Joint De	ebtor (Spouse) (Last, First	, Middle):	
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):							used by the J maiden, and		in the last 8 years):	
Last four digits of Soc. Sec. or Individual (if more than one, state all) 26-0484190	dual-Taxpay	yer I.D. (I	TIN) No./0	Complete El	IN Last for (if more	our digits o than one, state	f Soc. Sec. or	Individual-T	Γaxpayer I.D. (ITIN) No	o./Complete EIN
Street Address of Debtor (No. and Str 700 S. Walton Blvd., Ste 100 Bentonville, AR		nd State):		ZIP Code		Address of	Joint Debtor	(No. and Str	reet, City, and State):	ZIP Code
County of Residence or of the Princip Benton	oal Place of	Business		72712	Count	y of Reside	ence or of the	Principal Pla	ace of Business:	
Mailing Address of Debtor (if differen	nt from stree	et address	s):		Mailir	ng Address	of Joint Debt	or (if differen	nt from street address):	
			_	ZIP Code						ZIP Code
Location of Principal Assets of Busin (if different from street address above	ess Debtor									1
Type of Debtor (Form of Organization) (Check one box) ☐ Individual (includes Joint Debtors See Exhibit D on page 2 of this fo ☐ Corporation (includes LLC and Ll) ☐ Partnership ☐ Other (If debtor is not one of the above check this box and state type of entity	ve entities,	Singlin 11 Railr Stocl Com Clear Othe	th Care Bu le Asset Re U.S.C. § 1 oad kbroker modity Bro ring Bank r Tax-Exe (Check box or is a tax- r Title 26 c	eal Estate as 101 (51B)	e) anization d States	defined	the I er 7 er 9 er 11 er 12	Cliention is Fi	busine	ecognition ding ecognition
Filing Fee (Check Full Filing Fee attached Filing Fee to be paid in installments (a attach signed application for the court's debtor is unable to pay fee except in in Form 3A. Filing Fee waiver requested (applicable attach signed application for the court's	applicable to its considerationstallments. Rule to chapter 7	individuals on certifyin Rule 1006(b 7 individua	ng that the o). See Offic	Check in the control of the control	Debtor is not if: Debtor's aggure less than all applicable A plan is bein Acceptances	a small busing regate nonco \$2,343,300 (color boxes: ng filed with of the plan w	debtor as defin ness debtor as on intingent liquida amount subject this petition.	defined in 11 United debts (exc to adjustment		e years thereafter).
Statistical/Administrative Informat ■ Debtor estimates that funds will be □ Debtor estimates that, after any ex there will be no funds available for Estimated Number of Creditors	e available i kempt prope or distributio	erty is exc on to unse	luded and ecured cred	administrati litors.	ive expense			THIS	SPACE IS FOR COURT	USE ONLY
1- 50- 100- 2 49 99 199 9	200- 1	,000- 5,000	5,001- 10,000	10,001- 25,000	25,001- 50,000	50,001- 100,000	OVER 100,000			
\$0 to \$50,001 to \$100,001 to \$50,000 to \$50,000 to \$500,000 to \$50	\$500,001 \$ to \$1 to	31,000,001 o \$10 nillion	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion				
	\$500,001 \$	31,000,001 o \$10	\$10,000,001 to \$50	\$50,000,001 to \$100	\$100,000,001 to \$500	\$500,000,001 to \$1 billion				

5:11-bk-70293 Doc#: 1 Filed: 01/26/11 Entered: 01/26/11 14:21:11 Page 2 of 12

B1 (Official For	m 1)(4/10)		Page 2		
Voluntar	y Petition	Name of Debtor(s): Northwest Health & Lifestyle Centre, Inc.			
(This page mi	st be completed and filed in every case)	Northwest fleature	a Linestyle Gentre, Inc.		
, ,	All Prior Bankruptcy Cases Filed Within Las	t 8 Years (If more than tw	o, attach additional sheet)		
Location Where Filed:	- None -	Case Number: Date Filed:			
Location Case Number: Date Filed: Where Filed:					
Pe	nding Bankruptcy Case Filed by any Spouse, Partner, or	Affiliate of this Debtor (If more than one, attach additional sheet)		
Name of Debtor: - None - Case Number: Date Filed:					
District:		Relationship:	Judge:		
	Exhibit A	(T. 1 1 1 1 C. 1 1 4	Exhibit B		
forms 10K a pursuant to s and is reque	(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.) □ Exhibit A is attached and made a part of this petition. (To be completed if debtor is an individual whose debts are primarily consumer definition. I, the attorney for the petitioner named in the foregoing petition, declare thave informed the petitioner that [he or she] may proceed under chapter 12, or 13 of title 11, United States Code, and have explained the relief available to the debtor the required by 11 U.S.C. §342(b). X Signature of Attorney for Debtor(s) (Date)				
☐ Yes, and ☐ No. (To be comp ☐ Exhibit If this is a jo.)	leted by every individual debtor. If a joint petition is filed, ead D completed and signed by the debtor is attached and made ant petition: D also completed and signed by the joint debtor is attached and signed by the joint debtor is attac	ch spouse must complete a part of this petition.	and attach a separate Exhibit D.)		
	Information Regardin (Check any ag	-			
	Debtor has been domiciled or has had a residence, princip days immediately preceding the date of this petition or for	al place of business, or pri			
	There is a bankruptcy case concerning debtor's affiliate, go	eneral partner, or partnersh	nip pending in this District.		
	Certification by a Debtor Who Reside (Check all app		tial Property		
	Landlord has a judgment against the debtor for possession	,	oox checked, complete the following.)		
	(Name of landlord that obtained judgment)	<u> </u>			
	(Address of landlord)				
	Debtor claims that under applicable nonbankruptcy law, the entire monetary default that gave rise to the judgment				
	Debtor has included in this petition the deposit with the coafter the filing of the petition.	ourt of any rent that would	become due during the 30-day period		
-	Debtor certifies that he/she has served the Landlord with t	his certification. (11 U.S.C	C. § 362(l)).		

B1 (Official Form 1)(4/10) Page 3

Voluntary Petition

(This page must be completed and filed in every case)

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

 \mathbf{X}_{-}

Signature of Debtor

X

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

Date

Signature of Attorney*

X /s/ Stanley V. Bond

Signature of Attorney for Debtor(s)

Stanley V. Bond 93034

Printed Name of Attorney for Debtor(s)

Bond Law Office

Firm Name

525 S. School Ave.

Suite 100

Fayetteville, AR 72701

Address

Email: attybond@me.com

479-444-0255 Fax: 479-444-7141

Telephone Number

January 26, 2011

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Wanda Munson

Signature of Authorized Individual

Wanda Munson

Printed Name of Authorized Individual

President

Title of Authorized Individual

January 26, 2011

Date

Name of Debtor(s):

Northwest Health & Lifestyle Centre, Inc.

Signatures

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

٠,					
	٦	١	,	•	

Date

Address

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

B4 (Official Form 4) (12/07)

United States Bankruptcy Court Western District of Arkansas

In re	Northwest Health & Lifestyle Centre, Inc.			
		Debtor(s)	Chapter	11

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

Following is the list of the debtor's creditors holding the 20 largest unsecured claims. The list is prepared in accordance with Fed. R. Bankr. P. 1007(d) for filing in this chapter 11 [or chapter 9] case. The list does not include (1) persons who come within the definition of "insider" set forth in 11 U.S.C. § 101, or (2) secured creditors unless the value of the collateral is such that the unsecured deficiency places the creditor among the holders of the 20 largest unsecured claims. If a minor child is one of the creditors holding the 20 largest unsecured claims, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

(1)	(2)	(3)	(4)	(5)
Name of creditor and complete mailing address including zip code	Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted	Nature of claim (trade debt, bank loan, government contract, etc.)	Indicate if claim is contingent, unliquidated, disputed, or subject to setoff	Amount of claim [if secured, also state value of security]
Signature Bank of Arkansas 700 SE Walton Blvd. Suite 2 PO Box 89 Bentonville, AR 72712	Signature Bank of Arkansas 700 SE Walton Blvd. Suite 2 Bentonville, AR 72712			440,000.00
Signature Bank of Arkansas 700 SE Walton Blvd. Suite 2 PO Box 89 Bentonville, AR 72712	Signature Bank of Arkansas 700 SE Walton Blvd. Suite 2 Bentonville, AR 72712	Credit Card		75,000.00
Signature Bank of Arkansas 700 SE Walton Blvd. Suite 2 PO Box 89 Bentonville, AR 72712	Signature Bank of Arkansas 700 SE Walton Blvd. Suite 2 Bentonville, AR 72712	Hyperbaric Oxygen Machine		60,000.00 (0.00 secured)

B4 (Official Form 4) (12/07) - Cont.							
In re	Northwest Health & Lifestyle Centre, Inc.	Case No.					
	Debtor(s)	_					

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

(Continuation Sheet)

(1)	(2)	(3)	(4)	(5)
Name of creditor and complete mailing address including zip code	Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted	Nature of claim (trade debt, bank loan, government contract, etc.)	Indicate if claim is contingent, unliquidated, disputed, or subject to setoff	Amount of claim [if secured, also state value of security]
	DECLARATION INDEPLIES			

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP

I, the President of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing list and that it is true and correct to the best of my information and belief.

Date	January 26, 2011	Signature	/s/ Wanda Munson
			Wanda Munson
			Procident

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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United States Bankruptcy Court Western District of Arkansas

In re	Northwest Health & Lifestyle C	entre, Inc.	Case No.	
		Debtor(s)	Chapter	11
	VER	IFICATION OF CREDITOR	MATRIX	
I, the P	resident of the corporation named a	as the debtor in this case, hereby verify that	the attached list of	f creditors is true and correct to
the bes	t of my knowledge.			
Date:	January 26, 2011	/s/ Wanda Munson		
2 4.00.		Wanda Munson/President		
		Signer/Title		

A & D Supply Company 950 N. 2nd St Rogers, AR 72756

A & M Electric PO Box 1299 Farmington, AR 72730

Airgas Mid South, Inc. PO Box 1152 Tulsa, OK 74101

Architectural Building Product dba Hard Rock Granite 807 W. Hudson Rd Rogers, AR 72756

Arkansas Dept. of Health PO Box 1437 Little Rock, AR 72203

Arkansas Dept. Workforce Svcs PO Box 8007 Little Rock, AR 72203

Arkansas DF&A Collection Section PO Box 9941 Little Rock, AR 72203-8090

Arkansas Western Gas PO Box 660559 Dallas, TX 75266

Benton County Tax Collector 215 East Central Room 101 Bentonville, AR 72712

Bentonville Glass, Inc. 507 S. Main Bentonville, AR 72712

Bentonville/Bella Vista CoC 202 E. Central Bentonville, AR 72712

Brown's Heat & Air 10 Madley Lane Bella Vista, AR 72714

City of Bentonville Utility Billing 117 W. Central Ave Bentonville, AR 72712-5256

Cockrell, Chris 302 S.E. 2nd St Bentonville, AR 72712

Collins, Jason 2409 Southwest Tenth Bentonville, AR 72712

Com-Tech of Northwest Arkansas 207 E. Monroe Ste B Lowell, AR 72745

Cox Communications PO Box 21380 Tulsa, OK 74121

DFM Bentonville, LLC 700 S. Walton Blvd. Ste 200 Bentonville, AR 72712

Digital Prining Solutions 2018 Town West Drive Rogers, AR 72756

Doctor's Choice PO Box 337 Washington Depot, CT 06794

Edward W. McDonagh Rev. Trust 6535 Claret Parkville, MO 64152

Edwards, Vicky 16425 Rainbow Rogers, AR 72756

Fayetteville Mechanical PO Box 8910 Fayetteville, AR 72703

First Federal Leasing 31 N. 9th St. PO Box 1145 Richmond, IN 47374

Grafco, LLC PO Box 814 Owasso, OK 74055

Hood & Stacy Law Firm 216 Main Street Bentonville Bentonville, AR 72712

Iberia Bank 200 West Congress St. Lafayette, LA 70501

Internal Revenue Service Special Procedures Staff 700 W. Capitol Ave. Little Rock, AR 72201

Isokinetics, Inc. PO Box 21 De Queen, AR 71832

Izzy Turf, LLC 303 Willington Ln Bentonville, AR 72712

Landauer, Inc. 2 Science Rd Glenwood, IL 60425

Lisle/Rutledge Attorneys 1458 Plaza Place Springdale, AR 72764 McDonagh, Edward W. 6535 Claret Parkville, MO 64152

Moser Corporation 601 N. 13th Street Rogers, AR 72756

MVC Advisory, Inc. 5103 Grove Dr. Rogers, AR 72758

Norma J. McDonagh Family Trust 6535 Claret Parkville, MO 64152

Ozark Imaging PO Box 773 Fayetteville, AR 72702

Personal Financial Services 2935 N. Arkansas St. Rogers, AR 72756

Physicians Sales & Service 3125 N. Great Southwest Pkwy Ste 200 Grand Prairie, TX 75050

Professional Cabling Solutions 225 Moore Ave Hindsville, AR 72738

Purple Armadillo 709 S.W. A St. Bentonville, AR 72712

R. Keys 915 N. Walton Blvd Bentonville, AR 72712

Rachel Zoellner 13113 Scenic Dr Rogers, AR 72756 Rebecca Ramick 2193 Megan St. Fayetteville, AR 72703

Rogers Chamber of Commerce 317 W. Walnut Rogers, AR 72756

Scrip Companies 360 Veteran's Parkway Bolingbrook, IL 60440

Signature Bank of Arkansas 700 SE Walton Blvd. Suite 2 PO Box 89 Bentonville, AR 72712

Stericycle PO Box 9001588 Louisville, KY 40290-1588

The Key Company 1313 W. Essex Ave Saint Louis, MO 63122

Thyssenkrupp Elevator Corp PO Box 933004 Atlanta, GA 31193

Total Control Systems, Inc. 13465 Puppy Creek Rd Suite C Springdale, AR 72762

Trade Credit Services PO Box 105525 Atlanta, GA 30348

Tuggle Construction Management 1720 E. Zion Rd Fayetteville, AR 72703

Vir Medice LLC 15650 N. Balck Canyon Hwy Ste B245 Phoenix, AZ 85053

Walton Street Properties, LLC

Wanda L. Munson 63 Fairway Dr. Bella Vista, AR 72714

Watkins Law Office 1106 W. Poplar St Rogers, AR 72756

William F. Mertins Mertins Law Firm 300 N. College, Suite 200 Fayetteville, AR 72702