| B1 (Official Form 1)(04/13)   |   |  |   |   |  |  |   |                          |
|---|---|--|---|---|--|--|---|--------------------------|
| United<br>Wes   | States Bank<br>stern District o   | ruptcy (<br>of Arkansa   | Court<br>is   |   |  |  | Voluntary   | Petition                 |
| Name of Debtor (if individual, enter Last, First Ouachita Management, Inc.  | , Middle):  |  | Name  | of Joint De   | ebtor (Spouse)   | (Last, First,  | Middle):  |                          |
| All Other Names used by the Debtor in the last (include married, maiden, and trade names):  | 8 years   |  |   |   | used by the Jo<br>maiden, and t  |  | in the last 8 years   |                          |
| Last four digits of Soc. Sec. or Individual-Taxpe (if more than one, state all)  26-3846774   | ayer I.D. (ITIN)/Con  | nplete EIN   | Last fo   | our digits o  | f Soc. Sec. or   | Individual-T   | Taxpayer I.D. (ITIN) N  | o./Complete EIN          |
| Street Address of Debtor (No. and Street, City, 4501 N. Hwy 7, Suite 2 Hot Springs Village, AR  | and State):   |  | Street  | Address of  | Joint Debtor   | (No. and Str   | eet, City, and State):  |                          |
|   | Г   | ZIP Code<br><b>71909</b>   | -   |   |  |  |   | ZIP Code                 |
| County of Residence or of the Principal Place of Garland  | f Business:   |  | Count   | y of Reside   | ence or of the   | Principal Pla  | ice of Business:  |                          |
| Mailing Address of Debtor (if different from str PO Box 8866  | eet address):   |  | Mailir  | ng Address  | of Joint Debto   | or (if differer  | nt from street address):  |                          |
| Hot Springs, AR   | г   | ZIP Code <b>71910</b>  | _   |   |  |  |   | ZIP Code                 |
| Location of Principal Assets of Business Debtor<br>(if different from street address above):  |   | <u>71910                                   </u>  |   |   |  |  |   |                          |
| Type of Debtor  |   | of Business  |   |   | -  | -  | tcy Code Under Whi  | ch                       |
| (Form of Organization) (Check one box)  ☐ Individual (includes Joint Debtors)  See Exhibit D on page 2 of this form.  ☐ Corporation (includes LLC and LLP)  ☐ Partnership  ☐ Other (If debtor is not one of the above entities, check this box and state type of entity below.)   | (Check one box)  ☐ Health Care Business ☐ Single Asset Real Estate as de in 11 U.S.C. § 101 (51B) ☐ Railroad ☐ Stockbroker ☐ Commodity Broker ☐ Clearing Bank |  | lefined   | ☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt   | er 7<br>er 9<br>er 11<br>er 12   | ☐ Ch<br>of<br>☐ Ch<br>of                               | napter 15 Petition for R a Foreign Main Procee napter 15 Petition for R a Foreign Main Procee napter 15 Petition for R a Foreign Nonmain Pr | eding<br>ecognition      |
| Chapter 15 Debtors Country of debtor's center of main interests:  Each country in which a foreign proceeding by, regarding, or against debtor is pending:   | ing (Check box, if applicable)  Debtor is a tax-exempt organization   |  | es  | defined   | are primarily con<br>1 in 11 U.S.C. §<br>ed by an individual, family, or h                           | (Check<br>nsumer debts,<br>101(8) as<br>dual primarily | busine  | are primarily ess debts. |
| Filing Fee (Check one box Full Filing Fee attached Filing Fee to be paid in installments (applicable to attach signed application for the court's considerat debtor is unable to pay fee except in installments. Form 3A. Filing Fee waiver requested (applicable to chapter attach signed application for the court's considerate. | individuals only). Musion certifying that the Rule 1006(b). See Offi 7 individuals only). M   | cial Check all C | btor is a si<br>btor is not<br>btor's agg<br>less than<br>applicable<br>plan is bein<br>ceptances | a small busing regate nonco \$2,490,925 (each boxes: no filed with of the plan was a small busing a small busing regate nonco | debtor as definences debtor as definences debtor as dentingent liquida amount subject this petition. | efined in 11 U<br>ted debts (exc<br>to adjustment      |   | ee years thereafter).    |
| Statistical/Administrative Information  ■ Debtor estimates that funds will be available  □ Debtor estimates that, after any exempt properthere will be no funds available for distributents.  | erty is excluded and  | administrativ  |   | es paid,  |  | THIS   | SPACE IS FOR COURT  | USE ONLY                 |
| Estimated Number of Creditors   | 1,000- 5,001-<br>5,000 10,000   | 10,001- 2  | 25,001-<br>50,000   | 50,001-<br>100,000  | OVER<br>100,000  |  |   |                          |
| Estimated Assets  So to \$50,001 to \$100,001 to \$500,001 to \$1 million   | \$1,000,001 \$10,000,001 to \$10 to \$50 million million  | \$50,000,001 \$<br>to \$100 t  | ]<br>5100,000,001<br>o \$500<br>nillion   | \$500,000,001<br>to \$1 billion   |  |  |   |                          |
| Estimated Liabilities   | \$1,000,001 \$10,000,001 to \$10 to \$50  | \$50,000,001   | 3100,000,001<br>o \$500   | \$500,000,001 to \$1 billion  |  |  |   |                          |

6:13-bk-72945 Doc#: 1 Filed: 08/27/13 Entered: 08/27/13 16:09:34 Page 2 of 8

| B1 (Official For  | rm 1)(04/13)  |   | Page 2  |  |
|---|---|---|---|--|
| Voluntary Petition  |   | Name of Debtor(s):  Ouachita Management, Inc.   |   |  |
| (This page must be completed and filed in every case)   |   | Guadina managonioni, mo.  |   |  |
|   | All Prior Bankruptcy Cases Filed Within Las   | t 8 Years (If more than two   | , attach additional sheet)                    |  |
| Location<br>Where Filed:  | - None -  | Case Number:  | Date Filed:                                   |  |
| Location<br>Where Filed:  |   | Case Number:  | Date Filed:                                   |  |
| Pe  | ending Bankruptcy Case Filed by any Spouse, Partner, or   | Affiliate of this Debtor (If  | more than one, attach additional sheet)       |  |
| Name of Debt<br>- None -  | tor:  | Case Number:  | Date Filed:                                   |  |
| District:   |   | Relationship:   | Judge:  |  |
|   | Exhibit A   | (T) 1   | Exhibit B                                     |  |
| (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 debts.)  I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b).  X  Signature of Attorney for Debtor(s) (Date) |   |  |
|   | Ext   | l<br>nibit C  |   |  |
|   | or own or have possession of any property that poses or is alleged to a Exhibit C is attached and made a part of this petition. | pose a threat of imminent and   | identifiable harm to public health or safety? |  |
|   |   | nibit D   |   |  |
| _   | bleted by every individual debtor. If a joint petition is filed, ea   | -   | nd attach a separate Exhibit D.)              |  |
|   | D completed and signed by the debtor is attached and made intraction:   | a part of this petition.  |   |  |
| If this is a joi  | ont petition:  D also completed and signed by the joint debtor is attached a  | and made a part of this petit   | ion.  |  |
|   | Information Regardin  | ng the Debtor - Venue   |   |  |
| _   | (Check any ap   | -   |   |  |
|   | Debtor has been domiciled or has had a residence, princip<br>days immediately preceding the date of this petition or for        |   |   |  |
|   | There is a bankruptcy case concerning debtor's affiliate, go  |   | ·   |  |
|   |   |   |   |  |
|   | Certification by a Debtor Who Reside<br>(Check all app  |   | ial Property                                  |  |
|   | Landlord has a judgment against the debtor for possession   |   | ox checked, complete the following.)          |  |
|   | (Name of landlord that obtained judgment)   |   |   |  |
|   |   |   |   |  |
|   |   |   |   |  |
|   | (Address of landlord)   |   |   |  |
|   | Debtor claims that under applicable nonbankruptcy law, the entire monetary default that gave rise to the judgment               |   |   |  |
|   | Debtor has included with this petition the deposit with the after the filing of the petition.                                   | court of any rent that would  | d become due during the 30-day period         |  |
| -   | □ Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).                           |   |   |  |

B1 (Official Form 1)(04/13) 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.

X

Signature of Debtor

X

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

Date

### Signature of Attorney\*

# X /s/ Marc Honey

Signature of Attorney for Debtor(s)

#### Marc Honey 86091

Printed Name of Attorney for Debtor(s)

#### Honey Law Firm, P. A.

Firm Name

PO Box 1254 1311 Central Avenue Hot Springs, AR 71902

Address

### (501) 321-1007 Fax: (501) 321-1255

Telephone Number

## August 27, 2013

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.

### ▼ /s/ Dr. Crayton Don Dailey

Signature of Authorized Individual

#### Dr. Crayton Don Dailey

Printed Name of Authorized Individual

#### President

Title of Authorized Individual

#### August 27, 2013

Date

Name of Debtor(s):

**Ouachita Management, 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.)

| _ | _ | _ | _ |  |
|---|---|---|---|--|

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.

# **EXHIBIT TO VOLUNTARY PETITION**

Marc Honey (86091)

Wm. Marshall Hubbard (2011285)

Travis L. Starr (2008015)

**B4** (Official Form 4) (12/07)

# United States Bankruptcy Court Western District of Arkansas

| In re | Ouachita Management, 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<br>mailing address including zip<br>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<br>contingent,<br>unliquidated,<br>disputed, or<br>subject to setoff | Amount of claim<br>[if secured, also<br>state value of<br>security] |
| Internal Revenue Service<br>PO Box 7346<br>Philadelphia, PA 19101-7346          | Internal Revenue Service<br>PO Box 7346<br>Philadelphia, PA 19101-7346  | Tax Debt   |   | 18,641.82   |
| Dept of Finance & Admin<br>PO Box 1172; Room 2380<br>Little Rock, AR 72203-1272 | Dept of Finance & Admin<br>PO Box 1172; Room 2380<br>Little Rock, AR 72203-1272   | Taxes  |   | 2,500.00  |
|   |   |  |   |   |
|   |   |  |   |   |
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| B4 (Offic | cial Form 4) (12/07) - Cont. |          |  |
|-----------|------------------------------|----------|--|
| In re     | Ouachita Management, 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<br>mailing address including zip<br>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<br>contingent,<br>unliquidated,<br>disputed, or<br>subject to setoff | Amount of claim<br>[if secured, also<br>state value of<br>security] |
|  |   |  |   |   |
|  |   |  |   |   |
|  |   |  |   |   |
|  |   |  |   |   |
|  |   |  |   |   |

# 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 | August 27, 2013 | Signature | /s/ Dr. Crayton Don Dailey |  |
|------|-----------------|-----------|----------------------------|--|
|      |                 | •         | Dr. Crayton Don Dailey     |  |
|      |                 |           | President                  |  |

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.

Dept of Finance & Admin PO Box 1172; Room 2380 Little Rock, AR 72203-1272

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

# **United States Bankruptcy Court** Western District of Arkansas

| In re Ouachita Management, In  | c.  | Case No.      |
|--|---|---------------|
|  | Debtor(s)   | Chapter 11    |
| COL  | RPORATE OWNERSHIP STATEMENT                                   | (RULE 7007.1) |
| or recusal, the undersigned couns following is a (are) corporation(s |   |               |
| ■ None [ <i>Check if applicable</i> ]                                |   |               |
|  |   |               |
| August 27, 2013  | /s/ Marc Honey  |               |
| Date   | Marc Honey 86091  | rout          |
|  | Signature of Attorney or Litig<br>Counsel for Ouachita Manage |               |
|  | Honey Law Firm, P. A.   | ·····         |
|  | PO Box 1254   |               |
|  | 1311 Central Avenue<br>Hot Springs, AR 71902                  |               |
|  | (501) 321-1007 Fax:(501) 321-1                                | 255           |