

**United States Bankruptcy Court
District of Arizona**

Voluntary Petition

Name of Debtor (if individual, enter Last, First, Middle): Florence Hospital at Anthem, LLC	Name of Joint Debtor (Spouse) (Last, First, Middle):
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):	All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all) 26-1523903	Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all)
Street Address of Debtor (No. and Street, City, and State): 4545 N. Hunt Highway Florence, AZ	Street Address of Joint Debtor (No. and Street, City, and State):
ZIP Code 85132	ZIP Code
County of Residence or of the Principal Place of Business: Pinal	County of Residence or of the Principal Place of Business:
Mailing Address of Debtor (if different from street address):	Mailing Address of Joint Debtor (if different from street address):
ZIP Code	ZIP Code
Location of Principal Assets of Business Debtor (if different from street address above):	

Type of Debtor (Form of Organization) (Check one box) <input type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input checked="" type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)	Nature of Business (Check one box) <input checked="" type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other	Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box) <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input checked="" type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding
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:	Tax-Exempt Entity (Check box, if applicable) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).	Nature of Debts (Check one box) <input type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input checked="" type="checkbox"/> Debts are primarily business debts.

Filing Fee (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.	Chapter 11 Debtors Check one box: <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input checked="" type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,343,300 (amount subject to adjustment on 4/01/13 and every three years thereafter). Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
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Statistical/Administrative Information *** Thomas H. Allen 11160 e-mail: tallen@asbazlaw.com *** THIS SPACE IS FOR COURT USE ONLY <input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.	
Estimated Number of Creditors <input type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input checked="" type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> OVER 100,000	
Estimated Assets <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input checked="" type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion	
Estimated Liabilities <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input checked="" type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion	

Voluntary Petition <i>(This page must be completed and filed in every case)</i>	Name of Debtor(s): Florence Hospital at Anthem, LLC
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All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet)

Location Where Filed: - None -	Case Number:	Date Filed:
Location Where Filed:	Case Number:	Date Filed:

Pending 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:

<p style="text-align: center;">Exhibit A</p> <p>(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.)</p> <p><input type="checkbox"/> Exhibit A is attached and made a part of this petition.</p>	<p style="text-align: center;">Exhibit B</p> <p>(To be completed if debtor is an individual whose debts are primarily consumer debts.)</p> <p>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).</p> <p>X _____ Signature of Attorney for Debtor(s) (Date)</p>
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Exhibit C

Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?

Yes, and Exhibit C is attached and made a part of this petition.

No.

Exhibit D

(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)

Exhibit D completed and signed by the debtor is attached and made a part of this petition.

If this is a joint petition:

Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.

Information Regarding the Debtor - Venue

(Check any applicable box)

Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.

There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.

Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.

Certification by a Debtor Who Resides as a Tenant of Residential Property

(Check all applicable boxes)

Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)

(Name of landlord that obtained judgment)

(Address of landlord)

Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and

Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.

Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

Voluntary Petition

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

Name of Debtor(s):
Florence Hospital at Anthem, LLC

Signatures

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 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 Attorney*

X /s/ Thomas H. Allen
Signature of Attorney for Debtor(s)

Thomas H. Allen 11160 e-mail: tallen@asbazlaw.com
Printed Name of Attorney for Debtor(s)

Allen, Sala & Bayne, PLC
Firm Name

1850 N. Central Avenue, Suite 1150
Phoenix, AZ 85004

Address

602-256-6000 Fax: 602-252-4712
Telephone Number

March 6, 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 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 bankruptcy 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.)

Address

X _____
Date

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.

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/ Timothy A. Johns
Signature of Authorized Individual

Timothy A. Johns
Printed Name of Authorized Individual

Manager
Title of Authorized Individual

March 6, 2013
Date

**United States Bankruptcy Court
District of Arizona**

In re Florence Hospital at Anthem, LLC

Debtor(s)

Case No. _____

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)
<i>Name of creditor and complete mailing address including zip code</i>	<i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	<i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	<i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff</i>	<i>Amount of claim [if secured, also state value of security]</i>
Morrison Management Specialists P.O. Box 102289 Atlanta, GA 30368-0228	Morrison Management Specialists P.O. Box 102289 Atlanta, GA 30368-0228	vendor debt		67,809.67
Professional Hospital Supply, Inc. P.O. Box 23229 Pasadena, CA 91185-3229	Professional Hospital Supply, Inc. P.O. Box 23229 Pasadena, CA 91185-3229	vendor debt		64,116.27
Blood Systems, Inc. P.O. Box 53022 Phoenix, AZ 85072	Blood Systems, Inc. P.O. Box 53022 Phoenix, AZ 85072	vendor debt		51,955.00
Sonora Quest Laboratories P.O. Box 29661 Dept 2059 Phoenix, AZ 85038-9661	Sonora Quest Laboratories P.O. Box 29661 Dept 2059 Phoenix, AZ 85038-9661	vendor debt		47,506.87
Microsoft Licensing, GP 1950 N. Stemmons Fwy, Suite 5010 Dallas, TX 75207	Microsoft Licensing, GP 1950 N. Stemmons Fwy, Suite 5010 Dallas, TX 75207	software licensing fees		46,170.65
Healthcare Management Systems, Inc. 2739 Momentum Place Chicago, IL 60689-5327	Healthcare Management Systems, Inc. 2739 Momentum Place Chicago, IL 60689-5327	vendor debt		45,722.60
GE Healthcare P.O. Box 640200 Pittsburgh, PA 15264-0200	GE Healthcare P.O. Box 640200 Pittsburgh, PA 15264-0200	vendor debt		36,510.45
Sun Life Financial P.O. Box 2274 Carol Stream, IL 60132-2774	Sun Life Financial P.O. Box 2274 Carol Stream, IL 60132-2774	vendor debt		33,002.68
VRV Group, Inc. 3246 E. Vogel Suite 1 Phoenix, AZ 85028	VRV Group, Inc. 3246 E. Vogel Suite 1 Phoenix, AZ 85028	vendor debt		32,700.00

Debtor(s)

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

(Continuation Sheet)

(1)	(2)	(3)	(4)	(5)
<i>Name of creditor and complete mailing address including zip code</i>	<i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	<i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	<i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff</i>	<i>Amount of claim [if secured, also state value of security]</i>
Johnson & Johnson Health Care Systems 5972 Collections Center Drive Chicago, IL 60693	Johnson & Johnson Health Care Systems 5972 Collections Center Drive Chicago, IL 60693	vendor debt		31,182.10
Diskriter Inc. 3257 W. Liberty Avenue Pittsburgh, PA 15216	Diskriter Inc. 3257 W. Liberty Avenue Pittsburgh, PA 15216	vendor debt		27,811.43
Pipeline Health Holdings LLC 600 California Street Suite 950 San Francisco, CA 94108	Pipeline Health Holdings LLC 600 California Street Suite 950 San Francisco, CA 94108	vendor debt		27,798.27
3M Health Information Systems 575 W. Murray Blvd. Salt Lake City, UT 84123	3M Health Information Systems 575 W. Murray Blvd. Salt Lake City, UT 84123	vendor debt		27,158.57
SWA Architects 48 E. Holly Street Pasadena, CA 91103	SWA Architects 48 E. Holly Street Pasadena, CA 91103	vendor debt		25,600.00
Schmidt Westergard & Company PLLC 77 W. University Mesa, AZ 85201	Schmidt Westergard & Company PLLC 77 W. University Mesa, AZ 85201	vendor debt		25,000.00
Advanced Benefit Solutions P.O. Box 71490 Phoenix, AZ 85050	Advanced Benefit Solutions P.O. Box 71490 Phoenix, AZ 85050	vendor debt		24,968.46
Cardinal Health c/o Bank of America P.O. Box 57130 Los Angeles, CA 90074-7130	Cardinal Health c/o Bank of America P.O. Box 57130 Los Angeles, CA 90074-7130	vendor debt		23,255.59
Fisher HealthCare 13551 Collections Center Drive Chicago, IL 60693	Fisher HealthCare 13551 Collections Center Drive Chicago, IL 60693	vendor debt		23,170.44
Orchard Software Corporation 701 Congressional Blvd., Suite 360 Carmel, IN 46032	Orchard Software Corporation 701 Congressional Blvd., Suite 360 Carmel, IN 46032	vendor debt		19,754.78
Bayard Advertising Agency, Inc. 902 Broadway New York, NY 10010	Bayard Advertising Agency, Inc. 902 Broadway New York, NY 10010	vendor debt		18,958.61

In re **Florence Hospital at Anthem, LLC**
Debtor(s)

Case No. _____

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS
(Continuation Sheet)

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

I, the Manager 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 **March 6, 2013**

Signature **/s/ Timothy A. Johns**
Timothy A. Johns
Manager

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.

Florence Hospital at Anthem, LLC -

3M HEALTH INFORMATION SYSTEMS
575 W. MURRAY BLVD.
SALT LAKE CITY UT 84123

ADVANCED BENEFIT SOLUTIONS
P.O. BOX 71490
PHOENIX AZ 85050

AGI LEASING, LLC
P.O. BOX 246
BELLEVUE WA 98009

ALLAN & PHYLLIS WEINSTEIN
4949 E. LINCOLN DRIVE, VILLA #4
PARADISE VALLEY AZ 85253

ALPHAGRAPHS
535 W. BASELINE
SUITE 104
MESA AZ 85210

ANDREW K. AND TANYA PFANNENSTIEL
5717 W. BONANZA LANE
PHOENIX AZ 85083

ANDREW K. PFANNENSTIEL
5717 W. BONANZA LANE
PHOENIX AZ 85083

ANDREW'S REFRIGERATION, INC.
5617 E. HILLERY DRIVE
SCOTTSDALE AZ 85254-2449

ANTHEM @ MERRILL RANCH COMMUNITY COUNCIL
P.O. BOX 62465
PHOENIX AZ 85082-2465

Florence Hospital at Anthem, LLC -

APPLIED MEDICAL
P.O. BOX 75001
CITY OF INDUSTRY CA 91716-9759

ARIZONA DEPARTMENT OF REVENUE
SPECIAL OPERATIONS UNIT
1600 WEST MONROE ST., 7TH FLOOR
PHOENIX AZ 85007

ARIZONA DEPARTMENT OF REVENUE
C/O AZ ATTY GEN TAX, BANKR & COLL SECT
1275 W. WASHINGTON AVE
PHOENIX AZ 85007

ARIZONA INTERPRETING SERVICE, INC.
4425 E. AGAVE ROAD, #120
PHOENIX AZ 85044

ARTHREX, INC.
P.O. BOX 403511
ATLANTA GA 30384-3511

ATRIUM MEDICAL CORPORATION
P.O. BOX 842888
BOSTON MA 02284-2888

BAXTER HEALTHCARE CORP
P.O. BOX 100714
PASADENA CA 91189

BAYARD ADVERTISING AGENCY, INC.
902 BROADWAY
NEW YORK NY 10010

BDI PHARMA, INC.
P.O. BOX 602317
CHARLOTTE NC 28260-2317

Florence Hospital at Anthem, LLC -

BEN AND CHRIS STRONG
4610 E. CERRA DE AGUILA
TUCSON AZ 85718

BERKELEY MEDEVICES
1330 SOUTH 51ST STREET
RICHMOND CA 94804-4628

BILLY AND TIFFANY ANDERSON
3357 E. MORELOS COURT
GILBERT AZ 85295

BIO-MEDICAL APPLICATIONS OF TEXAS, INC.
P.O. BOX 749959
LOS ANGELES CA 90074-9959

BIO-RAD LABORATORIES
CLINICAL DIAGNOSTICS GROUP
P.O. BOX 849740
LOS ANGELES CA 90084-9740

BLOOD SYSTEMS, INC.
P.O. BOX 53022
PHOENIX AZ 85072

BORIK HOSPITALIST, INC.
1143 W. MAPLEWOOD STREET
CHANDLER AZ 85286

BRIAN AND DENICE MCCALLEY
8700 BRODIE LANE, #831
AUSTIN TX 78745

BRIAN HESS
3112 NORTH 51ST STREET
PHOENIX AZ 85018

Florence Hospital at Anthem, LLC -

BRYAN MCCORMICK
3430 N. MOUNTAIN RIDGE
MESA AZ 85206

C-SCAN TECHNOLOGIES
P.O. BOX 87239
PHOENIX AZ 85080-7289

CARDINAL HEALTH
C/O BANK OF AMERICA
P.O. BOX 57130
LOS ANGELES CA 90074-7130

CAREER BUILDERS, LLC
13047 COLLECTION CENTER DRIVE
CHICAGO IL 60693-0130

CARSTENS
P.O. BOX 99110
CHICAGO IL 60693

CATERINA SCIANNA
656 W. MESQUITE STREET
GILBERT AZ 85233

CBS TECHNOLOGIES, INC.
P.O. BOX 421759
HOUSTON TX 77242-1759

CENTURY LINK
P.O. BOX 52187
PHOENIX AZ 85072-2187

CENTURYLINK
P.O. BOX 29040
PHOENIX AZ 85038-9040

Florence Hospital at Anthem, LLC -

CHERYL WOODMANSEE
P.O. BOX 2087
FLORENCE AZ 85132

CHRISTINE GIUDICE
3444 E. WASHINGTON AVENUE
GILBERT AZ 85234

COLLEGE OF AMERICAN PATHOLOGISTS
P.O. BOX 71698
CHICAGO IL 60694-1698

COLONIAL FUNDING NETWORK, INC.
1501 BROADWAY, SUITE 360
NEW YORK NY 10036

COLUMBIA STATE BANK
719 SECOND AVENUE, #500
SEATTLE WA 98104

COMP RAY INC.
205 W. DEER VALLEY ROAD
PHOENIX AZ 85027

COMPANION LIFE INSURANCE CO.
@ TOTAL DENTAL ADMINISTRATORS
P.O. BOX 74960
90074-9630

CONMED CORPORATION
P.O. BOX 6814
CHURCH STREET STATION
NEW YORK NY 10249-6814

COOK MEDICAL INCORPORATED
22988 NETWORK PLACE
CHICAGO IL 60673-1229

Florence Hospital at Anthem, LLC -

COOLIDGE CHAMBER OF COMMERCE
320 W. CENTRAL AVENUE
COOLIDGE AZ 85128

COREY MCCORMICK
4135 SOUTH POWER ROAD, #112
MESA AZ 85207

COVIDIEN
675 MCDONNELL BLVD.
HAZELWOOD MO 63042

CR BARD INC.
P.O. BOX 75767
CHARLOTTE NC 28275

CYBERSOURCE CORPORATION

DAN QUAN
610 E. BELL ROAD, #2-176
PHOENIX AZ 85022

DAVID LINDBERG
2745 N. STERLING
MESA AZ 85207

DAVID WANGER
1717 SOUTH COLE
GILBERT AZ 85295

DAZZY, INC.
1715 W. 4TH STREET
TEMPE AZ 85281

Florence Hospital at Anthem, LLC -

DISKRITER INC.
3257 W. LIBERTY AVENUE
PITTSBURGH PA 15216

EDWARD G. BROWN

EXECUTIVE HEALTH RESOURCES, INC.
P.O. BOX 822688
PHILADELPHIA PA 19182-2688

FASTEST LAP, LLC
3430 N. MOUNTAIN RIDGE
#25
MESA AZ 85207

FHAD PROPERTY, LLC
5656 S. POWER ROAD
GILBERT AZ 85295

FIDELITY NATIONAL TITLE
60 E. RIO SAALADO PARKWAY
#1102
TEMPE AZ 85281

FISHER HEALTHCARE
13551 COLLECTIONS CENTER DRIVE
CHICAGO IL 60693

G. NEIL
P.O. BOX 451179
FORT LAUDERDALE FL 33345-1179

GE HEALTHCARE
P.O. BOX 640200
PITTSBURGH PA 15264-0200

Florence Hospital at Anthem, LLC -

GE HEALTHCARE
2984 COLLECTIONS CENTER DRIVE
CHICAGO IL 60693

GEMS

GENZYNE
P.O. BOX 223013
PITTSBURGH PA 15251-2013

GERMFREE LABORATORIES, INC.
11 AVIATOR WAY
ORMOND BEACH FL 32174

GILBERT HOSPITAL, LLC
8020 E. PALM LANE
MESA AZ 85207

GREG SCALLON

HARLON SCOTT ROMAN
30 CAMPANILLA
SAN CLEMENTE CA 92673

HCI RESOURCES
2555 W. FAIRVIEW STREET, SUITE 104
CHANDLER AZ 85224

HEALTH CARE LOGISTICS
P.O. BOX 400
CIRCLEVILLE OH 43113-0400

Florence Hospital at Anthem, LLC -

HEALTHCARE MANAGEMENT SYSTEMS, INC.
2739 MOMENTUM PLACE
CHICAGO IL 60689-5327

HEATHER RUSH
26542 N. 53RD GLEN
PHOENIX AZ 85083

HILL-ROM
P.O. BOX 643592
PITTSBURGH PA 15264-3592

HOSPIRA WORLDWIDE, INC.
75 REMITTANCE DRIVE, SUITE 6136
CHICAGO IL 60675-6136

HOWMEDICA OSTEONICS CORPORATION
BOX 93213
CHICAGO IL 60673-3213

HULL ANESTHESIA
7521 TALBERT AVENUE
HUNTINGTON BEACH CA 92648-1382

INSIGHT DIRECT USA, INC.
P.O. BOX 731069
DALLAS TX 75373-1069

INTEGRA
311 ENTERPRISE DRIVE
PLAINSBORO NJ 08536

INTELLIQUICK DELIVERY, INC.
P.O. BOX 34964
PHOENIX AZ 85067

Florence Hospital at Anthem, LLC -

INTERNAL REVENUE SERVICE
CENTRALIZED INSOLVENCY OPERATIONS
P.O. BOX 7346
PHILADELPHIA PA 19101-7346

JAMES PRICE
6109 E. EXETER BLVD.
SCOTTSDALE AZ 85251

JANE JADLOT
1905 E. HACKAMORE STREET
MESA AZ 85203

JASON ORLANDO
7743 E. DOWNING
MESA AZ 85207

JEFFREY M. YOUNG
21415 S. 142ND STREET
CHANDLER AZ 85286

JERRY AND KARYN SHINKLE
11345 E. ROSCOE AVENUE
MESA AZ 85212

JERRY AND MARGARET LUCAS
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OLYMPUS AMERICA, INC.
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DEPT. 600
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OMNICELL, INC.
DEPT. CH 17247
PALATINE IL 60055-7247

ORCHARD SOFTWARE CORPORATION
701 CONGRESSIONAL BLVD., SUITE 360
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PACIFIC OFFICE AUTOMATION
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PAUL D. ELLSWORTH, PLC
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