B1 (Official	Form 1)(1/	08)										
			United S MIDDL			ruptcy (OF FLO					Volunta	ry Petition
Name of Debtor (if individual, enter Last, First, Middle): Americare Assisted Living Inc				Name	of Joint De	ebtor (Spouse	e) (Last, First,	, Middle):				
(include ma	Names used barried, maide ater's Edç	en, and trade	or in the last 8 e names):	years					used by the J, maiden, and		in the last 8 years):	
	one, state all)		ividual-Taxpa	yer I.D. (ITIN) No./0	Complete EI		our digits of re than one, s		r Individual-7	Γaxpayer I.D. (ITIN	N) No./Complete EIN
Street Addr	ress of Debto ay Road	r (No. and S	Street, City, a	nd State)	_	ZIP Code		Address of	Joint Debtor	(No. and Str	reet, City, and State	e): ZIP Code
County of F Volusia		of the Princ	cipal Place of	Business	s:	<u>32738-345</u>		y of Reside	nce or of the	Principal Pla	ace of Business:	<u> </u>
-	exington A		erent from stre	et addres	is):	ZIP Code		g Address	of Joint Debt	tor (if differen	nt from street addre	ess): ZIP Code
	f Principal Ast from street a		siness Debtor ove):			32724	<u> </u>					
 ☐ 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.) 			Nature of Business (Check one box) Health Care Business Single Asset Real Estate as defir in 11 U.S.C. § 101 (51B) Railroad Stockbroker Commodity Broker Clearing Bank Other Tax-Exempt Entity (Check box, if applicable) Debtor is a tax-exempt organiza under Title 26 of the United Stata Code (the Internal Revenue Cod			e) anization d States	defined	the I ter 7 ter 9 ter 11 ter 12	Petition is Fi	for	for Recognition roceeding for Recognition	
Filing Fee (Check one box) Full Filing Fee attached 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. Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.				or Check	Debtor is a cif: Debtor's a to insiders all applica A plan is b	a small busin not a small bu aggregate nor s or affiliates) able boxes: being filed w ces of the plan	ncontingent li) are less than with this petition were solicit	s defined in 11 U.S or as defined in 11 iquidated debts (ex 1 \$2,190,000.	U.S.C. § 101(51D). scluding debts owed m one or more			
Statistical/Administrative Information *** Frank M. Wolff 319521 *** ■ Debtor estimates that funds will be available for distribution to unsecured creditors. □ Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.					SPACE IS FOR CO	URT USE ONLY						
1- 49	Number of Ci	Creditors 100- 199	200-	1,000- 5,000	5,001- 10,000		25,001- 50,000	50,001- 100,000	OVER 100,000			
Estimated A \$\ \triangle \text{SO to} \\ \\$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 S to \$1 t	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion				
Estimated L \$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	to \$100	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion				

B1 (Official Form 1)(1/08) Page 2 Name of Debtor(s): Voluntary Petition **Americare Assisted Living Inc** (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Location Date Filed: Where Filed: - None -Location Case Number: Date Filed: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission 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 pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. Signature of Attorney for Debtor(s) (Date) 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(1)).

B1 (Official Form 1)(1/08)

Signatures

Voluntary Petition

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

Name of Debtor(s):

Americare Assisted Living Inc

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.

T 7	
X	
	-

Signature of Debtor

X.

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

Date

Signature of Attorney*

X /s/ Frank M. Wolff

Signature of Attorney for Debtor(s)

Frank M. Wolff 319521

Printed Name of Attorney for Debtor(s)

Wolff, Hill, McFarlin & Herron, P.A.

Firm Name

1851 West Colonial Drive Orlando, FL 32804

Address

(407) 648-0058 Fax: (407) 648-0681

Telephone Number

March 23, 2009

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.

\mathbf{X} /s/ Steven Anderson

Signature of Authorized Individual

Steven Anderson

Printed Name of Authorized Individual

President

Title of Authorized Individual

March 23, 2009

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.

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- 7	٩.
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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.)

•	c	7	-	

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.

United States Bankruptcy Court MIDDLE DISTRICT OF FLORIDA

In re	Americare Assisted Living 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]
Bank of America	Bank of America	credit card		3,291.18
Business Card	Business Card			
PO Box 15184	PO Box 15184			
Wilmington, DE 19850-5184	Wilmington, DE 19850-5184			4 007 00
Bright House Networks	Bright House Networks	cable		1,207.00
1195 S Woodland	1195 S Woodland			
Deland, FL 32720	Deland, FL 32720	40		00.00
Certified Electronic Systems	Certified Electronic Systems	AC repair		90.00
1120 A Enterprise Ct Daytona Beach, FL 32117	1120 A Enterprise Ct			
Certified Electronic Systems	Daytona Beach, FL 32117 Certified Electronic Systems	A/C repair		90.00
1120 A Enterprise Ct	1120 A Enterprise Ct	A/C repair		90.00
Daytona Beach, FL 32117	Daytona Beach, FL 32117			
City Lite Development Corp	City Lite Development Corp	past due rent		65,762.89
472 Mason Drive	472 Mason Drive	past due rent		05,702.09
Breese, IL 62230	Breese, IL 62230			
City of Deltona	City of Deltona			37.50
2345 Providence Blvd	2345 Providence Blvd			07.00
Deltona, FL 32725	Deltona, FL 32725			
Deltona Water	Deltona Water	water		927.29
PO Box 8501	PO Box 8501			
Deltona, FL 32728	Deltona, FL 32728			
Embarg	Embarg	telephone		242.81
PO Box 96064	PO Box 96064	•		
Montague, CA 96064	Montague, CA 96064			
Emerald Waste Services	Emerald Waste Services	trash pick up		454.67
PO Box 79480	PO Box 79480			
Baltimore, MD 21279	Baltimore, MD 21279			
Florida Dept of Revenue	Florida Dept of Revenue	unemployment tax		889.58
Bankruptcy Unit	Bankruptcy Unit			
PO Box 6668	PO Box 6668			
Tallahassee, FL 32314-6668	Tallahassee, FL 32314-6668			
Florida Power & Light Co	Florida Power & Light Co	electricity		3,072.83
FPL General Mail Facility	FPL General Mail Facility			
Miami, FL 33102	Miami, FL 33102			

B4 (Offi	cial Form 4) (12/07) - Cont.	
In re	Americare Assisted Living 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]
Florida Public Utilities 401 S Dixie Hwy West Palm Beach, FL 33401	Florida Public Utilities 401 S Dixie Hwy West Palm Beach, FL 33401	natural gas		985.52
HD Supply PO Box 509058 San Diego, CA 92150-9058	HD Supply PO Box 509058 San Diego, CA 92150-9058			184.30
Owens Distributors PO Box 1358 Sanford, FL 32772	Owens Distributors PO Box 1358 Sanford, FL 32772			225.00
Signal 21 247 E Graves Ave Orange City, FL 32763	Signal 21 247 E Graves Ave Orange City, FL 32763	alarm monitoring		111.83
Terminix 1838 Mason Ave Daytona Beach, FL 32117	Terminix 1838 Mason Ave Daytona Beach, FL 32117			511.20
Too Cool! Inc 345 Buford Ave Orange City, FL 32763	Too Cool! Inc 345 Buford Ave Orange City, FL 32763	A/C service		3,030.00
Volusia County Tax Collector 123 West Indiana Avenue Deland, FL 32720-4602	Volusia County Tax Collector 123 West Indiana Avenue Deland, FL 32720-4602	local business tax		140.00

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	March 23, 2009	Signature	/s/ Steven Anderson
		-	Steven Anderson
			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.