

**United States Bankruptcy Court
Middle District of Florida**

Voluntary Petition

| | |
|--|--|
| Name of Debtor (if individual, enter Last, First, Middle): Abraham, Gerald Michael | 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): None | 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): 2581 | 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) 27499 Riverview Center Blvd Bonita Springs, FL | Street Address of Joint Debtor (No. and Street, City, and State) |
| ZIPCODE 34134 | ZIPCODE |
| County of Residence or of the Principal Place of Business: Lee | 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): |
| ZIPCODE | ZIPCODE |
| Location of Principal Assets of Business Debtor (if different from street address above): | |
| ZIPCODE | |

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

| | |
|--|--|
| <p>Filing Fee (Check one box)</p> <p><input checked="" type="checkbox"/> Full Filing Fee attached</p> <p><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 No. 3A.</p> <p><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.</p> | <p>Check one box: Chapter 11 Debtors</p> <p><input type="checkbox"/> Debtor is a small business as defined in 11 U.S.C. § 101(51D)</p> <p><input checked="" type="checkbox"/> Debtor is not a small business as defined in 11 U.S.C. § 101(51D)</p> <p>Check if:</p> <p><input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,343,300 (<i>amount subject to adjustment on 4/01/13 and every three years thereafter</i>).</p> <p>Check all applicable boxes</p> <p><input type="checkbox"/> A plan is being filed with this petition.</p> <p><input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes, in accordance with 11 U.S.C. § 1126(b).</p> |
|--|--|

| | |
|---|--|
| <p>Statistical/Administrative Information</p> <p><input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors.</p> <p><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.</p> | <p>THIS SPACE IS FOR COURT USE ONLY</p> |
| <p>Estimated Number of Creditors</p> <p><input checked="" type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1000-5000 <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</p> | |
| <p>Estimated Assets</p> <p><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</p> | |
| <p>Estimated Liabilities</p> <p><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</p> | |

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

Name of Debtor(s):
Gerald Michael Abraham

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 /s/ Gerald Michael Abraham
Signature of Debtor

X _____
Signature of Joint Debtor

Telephone Number (If not represented by attorney)
5/19/10
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 § 1515 of title 11 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/ Christian B. Felden
Signature of Attorney for Debtor(s)

CHRISTIAN B. FELDEN 379727
Printed Name of Attorney for Debtor(s)

Felden and Felden, P.A.
Firm Name

1415 Panther Lane
Address

Suite 326 Naples, FL 34109

239-263-2277
Telephone Number

5/19/10
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 _____
Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of Non-Attorney 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 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before 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.

UNITED STATES BANKRUPTCY COURT
Middle District of Florida

In re Gerald Michael Abraham
Debtor(s)

Case No. _____
(if known)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.



1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*



2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

**UNITED STATES BANKRUPTCY COURT
Middle District of Florida**

In re Gerald Michael Abraham,
Debtor

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 and 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> |
| Bank of America PO BOx 17054 Wilmington, DE 19850 | | | | 3,000.00 |
| Suncoast Schools FCU PO Box 11904 Tampa, FL 33680 | | | | 5,000.00 |
| Discover Financial Services LLC PO Box 15316 Wilmington, DE 19850 | | | | 8,000.00 |

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| (1) <i>Name of creditor and complete mailing address including zip code</i> | (2) <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> | (3) <i>Nature of claim (trade debt, bank loan, government contract, etc.</i> | (4) <i>Indicate if claim is contingent, unliquidated, disputed or subject to setoff</i> | (5) <i>Amount of claim [if secured also state value of security]</i> |
|--|---|---|--|---|
|--|---|---|--|---|

| | | | | |
|--|--|--|--|-----------|
| Fifth Third Bank 5050 Kingsley Dr Cincinnati, OH 45227 | | | | 15,000.00 |
|--|--|--|--|-----------|

| | | | | |
|---|--|--|--|-----------|
| Audi Financial c/o VW Credit, Inc PO Box 3 Hillsboro, OR 97123 | | | | 20,000.00 |
|---|--|--|--|-----------|

| | | | | |
|--|--|--|--|-----------|
| Regions PO BOx 11007 Birmingham, AL 35288 | | | | 20,000.00 |
|--|--|--|--|-----------|

| | | | | |
|--|--|--|--|-----------|
| Wachovia Bank PO Box 3117 Winston Salem, NC 27102 | | | | 25,000.00 |
|--|--|--|--|-----------|

| | | | | |
|--|--|--|--|-----------|
| Ferrari Financial Services 250 Sylvan Ave Englewood Cliffs, NJ 07632 | | | | 30,000.00 |
|--|--|--|--|-----------|

| | | | | |
|---|--|--|--|-----------|
| Wachovia PO Box 3117 Winston Salem, NC 27102 | | | | 30,000.00 |
|---|--|--|--|-----------|

| | | | | |
|---|--|--|--|-----------|
| Mercedes-Benz Financial P.O. Box 685 Roanoke, TX 76262 | | | | 30,000.00 |
|---|--|--|--|-----------|

| | | | | |
|--|--|--|--|-----------|
| Suncoast Bank PO BOx 11904 Tampa, FL 33680 | | | | 30,000.00 |
|--|--|--|--|-----------|

| (1) <i>Name of creditor and complete mailing address including zip code</i> | (2) <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> | (3) <i>Nature of claim (trade debt, bank loan, government contract, etc.</i> | (4) <i>Indicate if claim is contingent, unliquidated, disputed or subject to setoff</i> | (5) <i>Amount of claim [if secured also state value of security]</i> |
|--|---|---|--|---|
|--|---|---|--|---|

| | | | | |
|--|--|--|--|-----------|
| Bank of America PO BOx 17054 Wilmington, DE 19850 | | | | 37,000.00 |
|--|--|--|--|-----------|

| | | | | |
|---|--|--|--|-------------------------------------|
| US Bank - Alabama Metro Indirect Lending PO Box 790179 St Louis, MO 63179 | | | | 60,000.00 Collateral FMV 0.00 |
|---|--|--|--|-------------------------------------|

| | | | | |
|---|--|--|--|------------|
| Regions Bank PO BOx 11007 Birmingham, AL 35288 | | | | 100,000.00 |
|---|--|--|--|------------|

| | | | | |
|---|--|--|--|------------|
| Chase Auto Finance c/o Allied Internation Credit Corp. 100 E Shore D, 3rd Fl Glenn Allen, VA 23059 | | | | 100,000.00 |
|---|--|--|--|------------|

| | | | | |
|--|--|--|--|------------|
| Bank of America PO BOx 17054 Wilmington, DE 19850 | | | | 125,000.00 |
|--|--|--|--|------------|

| | | | | |
|--|--|--|--|------------|
| Bank of America PO BOx 17054 Wilmington, DE 19850 | | | | 217,000.00 |
|--|--|--|--|------------|

| | | | | |
|---|--|--|--|------------|
| Regions Bank PO BOx 11007 Birmingham, AL 35288 | | | | 250,000.00 |
|---|--|--|--|------------|

| | | | | |
|--|--|--|--|------------|
| Wachovia Bank PO Box 3117 Winston Salem, NC 27102 | | | | 250,000.00 |
|--|--|--|--|------------|

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing list of twenty largest unsecured creditors and that it is true and correct to the best of my knowledge, information and belief.

Date 5/19/10 Signature /s/ Gerald Michael Abraham
GERALD MICHAEL ABRAHAM

B6 Cover (Form 6 Cover) (12/07)

FORM 6. SCHEDULES

Summary of Schedules

Statistical Summary of Certain Liabilities and Related Data (28 U.S.C. § 159)

Schedule A - Real Property

Schedule B - Personal Property

Schedule C - Property Claimed as Exempt

Schedule D - Creditors Holding Secured Claims

Schedule E - Creditors Holding Unsecured Priority Claims

Schedule F - Creditors Holding Unsecured Nonpriority Claims

Schedule G - Executory Contracts and Unexpired Leases

Schedule H - Codebtors

Schedule I - Current Income of Individual Debtor(s)

Schedule J - Current Expenditures of Individual Debtor(s)

Unsworn Declaration under Penalty of Perjury

GENERAL INSTRUCTIONS: The first page of the debtor's schedules and the first page of any amendments thereto must contain a caption as in Form 16B. Subsequent pages should be identified with the debtor's name and case number. If the schedules are filed with the petition, the case number should be left blank

Schedules D, E, and F have been designed for the listing of each claim only once. Even when a claim is secured only in part or entitled to priority only in part, it still should be listed only once. A claim which is secured in whole or in part should be listed on Schedule D only, and a claim which is entitled to priority in whole or in part should be listed on Schedule E only. Do not list the same claim twice. If a creditor has more than one claim, such as claims arising from separate transactions, each claim should be scheduled separately.

Review the specific instructions for each schedule before completing the schedule.

In re Gerald Michael Abraham
Debtor

Case No. _____
(If known)

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a co-tenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| DESCRIPTION AND LOCATION OF PROPERTY | NATURE OF DEBTOR'S INTEREST IN PROPERTY | HUSBAND, WIFE, JOINT OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION | AMOUNT OF SECURED CLAIM |
|--------------------------------------|---|-----------------------------------|--|-------------------------|
| None | | | | |

Total 0.00

(Report also on Summary of Schedules.)

In re Gerald Michael Abraham
Debtor

Case No. _____
 (If known)

SCHEDULE B - PERSONAL PROPERTY
 (Continuation Sheet)

| TYPE OF PROPERTY | N O N E | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
|---|------------------------------|--|--------------------------------------|--|
| 8. Firearms and sports, photographic, and other hobby equipment. 9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. 10. Annuities. Itemize and name each issuer. 11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | X X X X | | | |
| 12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars. | | 401(K) Plan Bank of Florida Immokalee Rd Naples, FL Gerald Abraham Defined Benefit Pension Plan Pension Planners 1045 Crosspointe Dr Naples, FL | | 51,000.00 1,000,000.00 |
| 13. Stock and interests in incorporated and unincorporated businesses. Itemize. | | 100% ownership of Bonita Enterprises | | 0.00 |
| 14. Interests in partnerships or joint ventures. Itemize. | X | | | |
| 15. Government and corporate bonds and other negotiable and non-negotiable instruments. | X | | | |
| 16. Accounts receivable. | | Accounts Receivable - Investment Loans - I WILL NEVER COLLECT Randy Sheburne 2245 E Colorado Blvd #104-332 Passodena, A 91107 Accounts Receivable - Southeast Capital - Ponzi Scheme - I WILL NEVER COLLECT Southeact Capital | | Indeterminate Indeterminate |

In re Gerald Michael Abraham

Case No. _____

Debtor

(If known)

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

| TYPE OF PROPERTY | N O N E | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
|--|------------------|---|--------------------------------------|--|
| 17. Alimony, maintenance, support, and property settlement to which the debtor is or may be entitled. Give particulars. | X | | | |
| 18. Other liquidated debts owing debtor including tax refunds. Give particulars. | X | | | |
| 19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property. | X | | | |
| 20. Contingent and noncontingent interests in estate or a decedent, death benefit plan, life insurance policy, or trust. | X | | | |
| 21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights of setoff claims. Give estimated value of each. | X | | | |
| 22. Patents, copyrights, and other intellectual property. Give particulars. | X | | | |
| 23. Licenses, franchises, and other general intangibles. Give particulars. | X | | | |
| 24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. §101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X | | | |
| 25. Automobiles, trucks, trailers, and other vehicles and accessories. | | 2009 Nissan GTR | | 60,000.00 |
| 26. Boats, motors, and accessories. | X | | | |
| 27. Aircraft and accessories. | X | | | |
| 28. Office equipment, furnishings, and supplies. | X | | | |
| 29. Machinery, fixtures, equipment, and supplies used in business. | X | | | |
| 30. Inventory. | X | | | |
| 31. Animals. | X | | | |
| 32. Crops - growing or harvested. Give particulars. | X | | | |
| 33. Farming equipment and implements. | X | | | |
| 34. Farm supplies, chemicals, and feed. | X | | | |

_____ continuation sheets attached Total

\$

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

In re Gerald Michael Abraham
 Debtor

Case No. _____
 (If known)

SCHEDULE B - PERSONAL PROPERTY
 (Continuation Sheet)

| TYPE OF PROPERTY | N O N E | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
|---|------------------|---|--------------------------------------|--|
| 35. Other personal property of any kind not already listed. Itemize. | X | 0 | | 1,117,706.00 |

In re Gerald Michael Abraham

Case No. _____

Debtor

(If known)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:
(Check one box)

11 U.S.C. § 522(b)(2)

Check if debtor claims a homestead exemption that exceeds \$146,450*.

11 U.S.C. § 522(b)(3)

| DESCRIPTION OF PROPERTY | SPECIFY LAW PROVIDING EACH EXEMPTION | VALUE OF CLAIMED EXEMPTION | CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION |
|--|--------------------------------------|----------------------------|---|
| 401(K) Plan | FSA §222.21(2) | 51,000.00 | 51,000.00 |
| Gerald Abraham Defined Benefit Pension Plan | FSA §222.21(2) | 1,000,000.00 | 1,000,000.00 |
| Microwave, Utensils, Tables, Chairs, TV, Bedroom Furniture, Cell Phone | FSA §222.25.25(4) | 356.00 | 356.00 |
| Clothing | FSA §222.25.25(4) | 200.00 | 200.00 |
| Rent Deposit | FSA §222.25.25(4) | 1,150.00 | 1,150.00 |
| 2009 Nissan GTR | FSA §222.25 | 0.00 | 60,000.00 |
| Checking Account - Gerald Abraham Trust Account | FSA §222.25.25(4) | 2,294.00 | 5,000.00 |
| 100% ownership of Bonita Enterprises | FSA §222.25.25(4) | 0.00 | 0.00 |

*Amount subject to adjustment on 4/1/13 and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6D (Official Form 6D) (12/07)

In re Gerald Michael Abraham,
 Debtor

Case No. _____
 (If known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, 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 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See Instructions Above.)</i> | CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
|--|--|---|------------|--------------|----------|---|---------------------------------|
| | | | | | | | |
| ACCOUNT NO. 00000512098671 US Bank - Alabama Metro Indirect Lending PO Box 790179 St Louis, MO 63179 | | Lien: PMSI in vehicle < 910 days Security: 2009 Nissan GTR Debt will be reaffirmed - \$1,513.78/mo CURRENT | | | | 60,000.00 | 60,000.00 |
| | | VALUE \$ 0.00 | | | | | |
| ACCOUNT NO. | | | | | | | |
| | | VALUE \$ | | | | | |
| ACCOUNT NO. | | | | | | | |
| | | VALUE \$ | | | | | |

0 continuation sheets attached

| | | |
|----------------------------------|--------------|--------------|
| Subtotal (Total of this page) | \$ 60,000.00 | \$ 60,000.00 |
| Total (Use only on last page) | \$ 60,000.00 | \$ 60,000.00 |

(Report also on Summary of Schedules) (If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

In re Gerald Michael Abraham
Debtor

Case No. _____
(if known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, 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 and Fed.R.Bankr.P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

Domestic Support Obligations

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$11,725* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

*Amount subject to adjustment on 4/1/13 and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6E (Official Form 6E) (04/10) - Cont.

In re Gerald Michael Abraham,
Debtor

Case No. _____
(if known)

Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$5,775* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

Deposits by individuals

Claims of individuals up to \$2,600* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

Taxes and Certain Other Debts Owed to Governmental Units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

Commitments to Maintain the Capital of an Insured Depository Institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

Claims for Death or Personal Injury While Debtor Was Intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

** Amounts are subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.*

0 continuation sheets attached

In re Gerald Michael Abraham,
 Debtor

Case No. _____
 (If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, 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 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i> | CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|--|--|--|------------|--------------|----------|-----------------------|
| | | | | | | |
| ACCOUNT NO. American Express PO Box 297812 Ft Lauderdale, FL 33329 | | | | | | 0.00 |
| ACCOUNT NO. Assoc Investment Corp PO BOX 3055 Salt Lake City, UT 84110 | | | | | | 0.00 |
| ACCOUNT NO. 850609173 Audi Financial c/o VW Credit, Inc PO Box 3 Hillsboro, OR 97123 | | Consideration: Repossessed Vehicle | | | | 20,000.00 |
| ACCOUNT NO. 63010018989389 Bank of America PO BOX 17054 Wilmington, DE 19850 | | Consideration: Repossessed BMW | | | | 3,000.00 |
| Subtotal | | | | | | \$ 23,000.00 |
| Total | | | | | | \$ |

8 continuation sheets attached

(Use only on last page of the completed Schedule F.)
 (Report also on Summary of Schedules and, if applicable, on the Statistical
 Summary of Certain Liabilities and Related Data.)

In re Gerald Michael Abraham,
Debtor

Case No. _____
(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i> | CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|--|---|------------|--------------|----------|-----------------------|
| | | | | | | |
| ACCOUNT NO. 4313070106035881 Bank of America PO BOX 17054 Wilmington, DE 19850 | | Consideration: Revolving Credit Card debt | | | | 217,000.00 |
| ACCOUNT NO. 4339930010841395 Bank of America PO BOX 17054 Wilmington, DE 19850 | | Consideration: Revolving Credit Card debt | | | | 125,000.00 |
| ACCOUNT NO. 4888936169410505 Bank of America PO BOX 17054 Wilmington, DE 19850 | | Consideration: Revolving Credit Card debt | | | | 37,000.00 |
| ACCOUNT NO. Chase 800 Brookside Blvd Westerville, OH 43081 | | | | | | 0.00 |
| ACCOUNT NO. 4266841168584330 Chase Auto Finance c/o Allied International Credit Corp. 100 E Shore D, 3rd Fl Glenn Allen, VA 23059 | | | | | | 100,000.00 |

Sheet no. 1 of 8 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

| | |
|----------|---------------|
| Subtotal | \$ 479,000.00 |
| Total | \$ |

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

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In re Gerald Michael Abraham,
 Debtor

Case No. _____
 (If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
 (Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i> | CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT UNLIQUIDATED DISPUTED | | | AMOUNT OF CLAIM |
|--|--|---|--|--|--|-----------------------|
| | | | | | | |
| ACCOUNT NO. Citi Cards PO Box 6241 Sioux Falls, SD 57117 | | | | | | 0.00 |
| ACCOUNT NO. Citibank NA PO BOX 528 Pelham, NY 10803 | | | | | | 0.00 |
| ACCOUNT NO. Diamler Chrysler Financial Services 36455 Corporate Dr Farmington Hills, MI 48331 | | | | | | 0.00 |
| ACCOUNT NO. 9432 Discover Financial Services LLC PO Box 15316 Wilmington, DE 19850 | | | | | | 8,000.00 |
| ACCOUNT NO. 0270000611 and 422 Ferrari Financial Services 250 Sylvan Ave Englewood Cliffs, NJ 07632 | | Consideration: Repossessed Vehicle | | | | 30,000.00 |

Sheet no. 2 of 8 continuation sheets attached
 to Schedule of Creditors Holding Unsecured
 Nonpriority Claims

| | | |
|----------|----|-----------|
| Subtotal | \$ | 38,000.00 |
| Total | \$ | |

(Use only on last page of the completed Schedule F.)
 (Report also on Summary of Schedules and, if applicable, on the
 Statistical Summary of Certain Liabilities and Related Data.)

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In re Gerald Michael Abraham,
 Debtor

Case No. _____
 (If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
 (Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i> | CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT UNLIQUIDATED DISPUTED | | | AMOUNT OF CLAIM |
|--|--|---|--|--|--|-----------------------|
| | | | | | | |
| ACCOUNT NO. Fifth Third Bank 5050 Kingsley Dr Cincinnati, OH 45227 | | Consideration: Revolving Credit Card debt | | | | 15,000.00 |
| ACCOUNT NO. First Premier Bank 601 S Minnesota Ave Sioux Falls, SD 57104 | | | | | | 0.00 |
| ACCOUNT NO. First USA Bank NA 800 Brooksedge Blvd Westerville, OH 43081 | | | | | | 0.00 |
| ACCOUNT NO. GMAC PO Box 380901 Bloomington, MN 55438 | | | | | | 0.00 |
| ACCOUNT NO. Lexus Financial Services 12735 MOrris Rd Ext A Alpharetta, GA 30004 | | | | | | 0.00 |

Sheet no. 3 of 8 continuation sheets attached
 to Schedule of Creditors Holding Unsecured
 Nonpriority Claims

| | | |
|----------|----|-----------|
| Subtotal | \$ | 15,000.00 |
| Total | \$ | |

(Use only on last page of the completed Schedule F.)
 (Report also on Summary of Schedules and, if applicable, on the
 Statistical Summary of Certain Liabilities and Related Data.)

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In re Gerald Michael Abraham,
Debtor

Case No. _____
(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i> | CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT UNLIQUIDATED DISPUTED | | | AMOUNT OF CLAIM |
|---|--|---|--|--|--|-----------------------|
| | | | | | | |
| ACCOUNT NO. Marylynne K Schwartz Shaw Gussis Fishman Glantz Wolfson & Towbin LLC 321 N Clark St, Ste 800 Chicago, IL 60654 | | Attorney for Ferrari Financial Services, Inc. | | | | Notice Only |
| ACCOUNT NO. 1024546448 Mercedes-Benz Financial P.O. Box 685 Roanoke, TX 76262 | | | | | | 30,000.00 |
| ACCOUNT NO. MFI 7181 Garfield Ave Huntington Beach, CA 92648 | | | | | | 0.00 |
| ACCOUNT NO. Neil Spector PO BOx 800 Tampa, FL 33601 | | Attorney for Suncoast Schools FCU | | | | Notice Only |
| ACCOUNT NO. Nissan Motor Acceptance PO Box 660360 Dallas, TX 75266 | | | | | | 0.00 |

Sheet no. 4 of 8 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

| | | |
|----------|----|-----------|
| Subtotal | \$ | 30,000.00 |
| Total | \$ | |

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

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In re Gerald Michael Abraham,
Debtor

Case No. _____
(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i> | CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|--|--|---|------------|--------------|----------|-----------------------|
| ACCOUNT NO. Philip Orsi 1191 E Newport Center Dr, Ste 101 Deerfield Beach, FL 33442 | | Attorney for Chase Bank USA NA | | | | Notice Only |
| ACCOUNT NO. Putnam Leasing 300 Main St, Ste 601 Stamford, CT 06901 | | Consideration: Repossessed | | | | 0.00 |
| ACCOUNT NO. 0061538698 Regions PO BOx 11007 Birmingham, AL 35288 | | Consideration: Repossessed Porsche | | | | 20,000.00 |
| ACCOUNT NO. 0924000007000057387 Regions Bank PO BOx 11007 Birmingham, AL 35288 | | Consideration: Personal loan | | | | 250,000.00 |
| ACCOUNT NO. 7691609000001401 Regions Bank PO BOx 11007 Birmingham, AL 35288 | | Consideration: Personal loan | | | | 100,000.00 |

Sheet no. 5 of 8 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

| | |
|----------|---------------|
| Subtotal | \$ 370,000.00 |
| Total | \$ |

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

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In re Gerald Michael Abraham,
 Debtor

Case No. _____
 (If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
 (Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i> | CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|--|--|---|------------|--------------|----------|-----------------------|
| | | | | | | |
| ACCOUNT NO. Roy L. Weinfield, Esq 800 Brickell Ave, Ste 1501 Miami, FL 33131 | | Attorney for VW Credit Inc | | | | Notice Only |
| ACCOUNT NO. Sears PO Box 6189 Sioux Falls, SD 57117 | | | | | | 0.00 |
| ACCOUNT NO. Steven K. Platzek 399 W Palmetto Park Rd, Ste 100 Boca Raton, FL 33432 | | Attorney for Putnam Leasing Co LLC | | | | Notice Only |
| ACCOUNT NO. 4608190020951007 Suncoast Bank PO BOX 11904 Tampa, FL 33680 | | | | | | 30,000.00 |
| ACCOUNT NO. 438693620 Suncoast Schools FCU PO Box 11904 Tampa, FL 33680 | | Consideration: Repossessed | | | | 5,000.00 |

Sheet no. 6 of 8 continuation sheets attached
 to Schedule of Creditors Holding Unsecured
 Nonpriority Claims

| | | |
|----------|----|-----------|
| Subtotal | \$ | 35,000.00 |
| Total | \$ | |

(Use only on last page of the completed Schedule F.)
 (Report also on Summary of Schedules and, if applicable, on the
 Statistical Summary of Certain Liabilities and Related Data.)

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In re Gerald Michael Abraham,
Debtor

Case No. _____
(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i> | CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT UNLIQUIDATED DISPUTED | | | AMOUNT OF CLAIM |
|--|--|---|--|--|--|-----------------------|
| | | | | | | |
| ACCOUNT NO. Target NB PO Box 673 Minneapolis, MN 55440 | | | | | | 0.00 |
| ACCOUNT NO. US Bank PO Box 5227 Cincinnati, OH 45201 | | | | | | 0.00 |
| ACCOUNT NO. Volkswagen Credit Inc PO Box 3 Hillsboro, OR 97123 | | Consideration: Repossession | | | | 0.00 |
| ACCOUNT NO. 01-09-5288706-4 Wachovia PO Box 3117 Winston Salem, NC 27102 | | | | | | 30,000.00 |
| ACCOUNT NO. 01334994902-7 Wachovia Bank PO Box 3117 Winston Salem, NC 27102 | | Consideration: Personal loan | | | | 250,000.00 |

Sheet no. 7 of 8 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

| | |
|----------|---------------|
| Subtotal | \$ 280,000.00 |
| Total | \$ |

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

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In re Gerald Michael Abraham,
 Debtor

Case No. _____
 (If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
 (Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i> | CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|--|--|---|------------|--------------|----------|-----------------------|
| | | | | | | |
| ACCOUNT NO. 4312437153699144 Wachovia Bank PO Box 3117 Winston Salem, NC 27102 | | Consideration: Revolving Credit Card debt | | | | 25,000.00 |
| ACCOUNT NO. | | | | | | |
| ACCOUNT NO. | | | | | | |
| ACCOUNT NO. | | | | | | |
| ACCOUNT NO. | | | | | | |
| ACCOUNT NO. | | | | | | |

Sheet no. 8 of 8 continuation sheets attached
 to Schedule of Creditors Holding Unsecured
 Nonpriority Claims

| | |
|----------|-----------------|
| Subtotal | \$ 25,000.00 |
| Total | \$ 1,295,000.00 |

(Use only on last page of the completed Schedule F.)
 (Report also on Summary of Schedules and, if applicable, on the
 Statistical Summary of Certain Liabilities and Related Data.)

In re Gerald Michael Abraham
 Debtor

Case No. _____
 (if known)

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, 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 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

| NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT. | DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT. |
|--|--|
| | |
| | |
| | |
| | |
| | |
| | |
| | |

In re Gerald Michael Abraham
Debtor

Case No. _____
(if known)

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, 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 and Fed. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

| NAME AND ADDRESS OF CODEBTOR | NAME AND ADDRESS OF CREDITOR |
|------------------------------|------------------------------|
| | |

In re Gerald Michael Abraham

Case _____ (if known)

Debtor

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

| | | |
|--|---------------------------------------|-------------|
| Debtor's Marital Status: <u>Single</u> | DEPENDENTS OF DEBTOR AND SPOUSE | |
| | RELATIONSHIP(S): <u>No dependents</u> | AGE(S): |
| Employment: | DEBTOR | SPOUSE |
| Occupation | <u>Psychiatrist</u> | |
| Name of Employer | <u>self employed</u> | |
| How long employed | <u>40 Years</u> | |
| Address of Employer | <u>27499 Riverview Center Blvd.</u> | <u>N.A.</u> |
| | <u>Bonita Springs, FL</u> | |

INCOME: (Estimate of average or projected monthly income at time case filed)

| | DEBTOR | SPOUSE |
|---|--------------------|----------------|
| 1. Monthly gross wages, salary, and commissions (Prorate if not paid monthly.) | \$ <u>0.00</u> | \$ <u>N.A.</u> |
| 2. Estimated monthly overtime | \$ <u>0.00</u> | \$ <u>N.A.</u> |
| 3. SUBTOTAL | \$ <u>0.00</u> | \$ <u>N.A.</u> |
| 4. LESS PAYROLL DEDUCTIONS | | |
| a. Payroll taxes and social security | \$ <u>0.00</u> | \$ <u>N.A.</u> |
| b. Insurance | \$ <u>0.00</u> | \$ <u>N.A.</u> |
| c. Union Dues | \$ <u>0.00</u> | \$ <u>N.A.</u> |
| d. Other (Specify: _____) | \$ <u>0.00</u> | \$ <u>N.A.</u> |
| 5. SUBTOTAL OF PAYROLL DEDUCTIONS | \$ <u>0.00</u> | \$ <u>N.A.</u> |
| 6.. TOTAL NET MONTHLY TAKE HOME PAY | \$ <u>0.00</u> | \$ <u>N.A.</u> |
| 7. Regular income from operation of business or profession or farm (Attach detailed statement) | \$ <u>9,000.00</u> | \$ <u>N.A.</u> |
| 8. Income from real property | \$ <u>0.00</u> | \$ <u>N.A.</u> |
| 9. Interest and dividends | \$ <u>0.00</u> | \$ <u>N.A.</u> |
| 10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above. | \$ <u>0.00</u> | \$ <u>N.A.</u> |
| 11. Social security or other government assistance (Specify) _____ | \$ <u>0.00</u> | \$ <u>N.A.</u> |
| 12. Pension or retirement income | \$ <u>0.00</u> | \$ <u>N.A.</u> |
| 13. Other monthly income _____ (Specify) _____ | \$ <u>0.00</u> | \$ <u>N.A.</u> |
| 14. SUBTOTAL OF LINES 7 THROUGH 13 | \$ <u>9,000.00</u> | \$ <u>N.A.</u> |
| 15. AVERAGE MONTHLY INCOME (Add amounts shown on Lines 6 and 14) | \$ <u>9,000.00</u> | \$ <u>N.A.</u> |
| 16. COMBINED AVERAGE MONTHLY INCOME (Combine column totals from line 15) | \$ <u>9,000.00</u> | |

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

Presently working part time. Monthly income averages from \$9000 to \$10000 per month.

In re Gerald Michael Abraham

Case No. _____

Debtor

(if known)

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made biweekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

| | | |
|---|-----------------------|--------------------|
| 1. Rent or home mortgage payment (include lot rented for mobile home) | | \$ <u>1,150.00</u> |
| a. Are real estate taxes included? | Yes _____ No <u>✓</u> | |
| b. Is property insurance included? | Yes _____ No <u>✓</u> | |
| 2. Utilities: a. Electricity and heating fuel | | \$ <u>150.00</u> |
| b. Water and sewer | | \$ <u>0.00</u> |
| c. Telephone | | \$ <u>200.00</u> |
| d. Other <u>Comcast Cable/Internet</u> | | \$ <u>150.00</u> |
| 3. Home maintenance (repairs and upkeep) | | \$ <u>0.00</u> |
| 4. Food | | \$ <u>400.00</u> |
| 5. Clothing | | \$ <u>0.00</u> |
| 6. Laundry and dry cleaning | | \$ <u>40.00</u> |
| 7. Medical and dental expenses | | \$ <u>0.00</u> |
| 8. Transportation (not including car payments) | | \$ <u>50.00</u> |
| 9. Recreation, clubs and entertainment, newspapers, magazines, etc. | | \$ <u>0.00</u> |
| 10. Charitable contributions | | \$ <u>0.00</u> |
| 11. Insurance (not deducted from wages or included in home mortgage payments) | | |
| a. Homeowner's or renter's | | \$ <u>50.00</u> |
| b. Life | | \$ <u>0.00</u> |
| c. Health | | \$ <u>400.00</u> |
| d. Auto | | \$ <u>150.00</u> |
| e. Other <u>Malpractice Insurance</u> | | \$ <u>400.00</u> |
| 12. Taxes (not deducted from wages or included in home mortgage payments) | | |
| (Specify) _____ | | \$ <u>0.00</u> |
| 13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan) | | |
| a. Auto | | \$ <u>1,513.00</u> |
| b. Other _____ | | \$ <u>0.00</u> |
| c. Other _____ | | \$ <u>0.00</u> |
| 14. Alimony, maintenance, and support paid to others | | \$ <u>0.00</u> |
| 15. Payments for support of additional dependents not living at your home | | \$ <u>0.00</u> |
| 16. Regular expenses from operation of business, profession, or farm (attach detailed statement) | | \$ <u>4,070.00</u> |
| 17. Other _____ | | \$ <u>0.00</u> |
| 18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data) | | \$ <u>8,723.00</u> |
| 19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document: | | |
| <u>None</u> | | |
| 20. STATEMENT OF MONTHLY NET INCOME | | |
| a. Average monthly income from Line 15 of Schedule I | | \$ <u>9,000.00</u> |
| b. Average monthly expenses from Line 18 above | | \$ <u>8,723.00</u> |
| c. Monthly net income (a. minus b.) | | \$ <u>277.00</u> |

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United States Bankruptcy Court
Middle District of Florida

In re Gerald Michael Abraham
Debtor

Case No. _____

Chapter 11

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

AMOUNTS SCHEDULED

| NAME OF SCHEDULE | ATTACHED (YES/NO) | NO. OF SHEETS | ASSETS | LIABILITIES | OTHER |
|---|-------------------|---------------|-----------------|-----------------|-------------|
| A - Real Property | YES | 1 | \$ 0.00 | | |
| B - Personal Property | YES | 4 | \$ 1,117,706.00 | | |
| C - Property Claimed as exempt | YES | 1 | | | |
| D - Creditors Holding Secured Claims | YES | 1 | | \$ 60,000.00 | |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | YES | 2 | | \$ 0.00 | |
| F - Creditors Holding Unsecured Nonpriority Claims | YES | 9 | | \$ 1,295,000.00 | |
| G - Executory Contracts and Unexpired Leases | YES | 1 | | | |
| H - Codebtors | YES | 1 | | | |
| I - Current Income of Individual Debtor(s) | YES | 1 | | | \$ 9,000.00 |
| J - Current Expenditures of Individual Debtors(s) | YES | 1 | | | \$ 8,723.00 |
| TOTAL | | 22 | \$ 1,117,706.00 | \$ 1,355,000.00 | |

United States Bankruptcy Court
Middle District of Florida

In re Gerald Michael Abraham
Debtor

Case No. _____

Chapter 11

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. §101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability | Amount |
|---|---------|
| Domestic Support Obligations (from Schedule E) | \$ 0.00 |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) | \$ 0.00 |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | \$ 0.00 |
| Student Loan Obligations (from Schedule F) | \$ 0.00 |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E | \$ 0.00 |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F) | \$ 0.00 |
| TOTAL | \$ 0.00 |

State the Following:

| | |
|--|-------------|
| Average Income (from Schedule I, Line 16) | \$ 9,000.00 |
| Average Expenses (from Schedule J, Line 18) | \$ 8,723.00 |
| Current Monthly Income (from Form 22A Line 12; OR , Form 22B Line 11; OR , Form 22C Line 20) | \$ 4,930.00 |

State the Following:

| | | |
|--|---------|-----------------|
| 1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column | | \$ 60,000.00 |
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column. | \$ 0.00 | |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column | | \$ 0.00 |
| 4. Total from Schedule F | | \$ 1,295,000.00 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4) | | \$ 1,355,000.00 |

Gerald Michael Abraham

In re _____

Case No. _____

Debtor

(If known)

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 24 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date 5/19/10

Signature: /s/ Gerald Michael Abraham
Debtor:

Date _____

Signature: Not Applicable
(Joint Debtor, if any)

[If joint case, both spouses must sign.]

DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

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 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 by that section.

Printed or Typed Name and Title, if any,
of Bankruptcy Petition Preparer

Social Security No.
(Required by 11 U.S.C. § 110.)

If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs this document.

Address

X _____
Signature of Bankruptcy Petition Preparer

Date

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 signed 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.

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

I, the _____ [the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership] of the _____ [corporation or partnership] named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of _____ sheets (*total shown on summary page plus 1*), and that they are true and correct to the best of my knowledge, information, and belief.

Date _____

Signature: _____

[Print or type name of individual signing on behalf of debtor.]

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

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.

UNITED STATES BANKRUPTCY COURT
Middle District of Florida

In Re Gerald Michael Abraham

Case No. _____
 (if known)

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, 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 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| | AMOUNT | SOURCE |
|------|--------|--------|
| 2010 | 40000 | |
| 2009 | | |
| 2008 | | |

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

SOURCE

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF
PAYMENTS

AMOUNT
PAID

AMOUNT STILL
OWING

US Bank
PO Box 5227
Cincinnati, OH 45201

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,850*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after date of adjustment.*

NAME AND ADDRESS OF CREDITOR
AND RELATIONSHIP TO DEBTOR

DATES OF
PAYMENTS

AMOUNT
PAID

AMOUNT STILL
OWING

None



c. *All debtors:* List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR | DATES OF PAYMENTS | AMOUNT PAID | AMOUNT STILL OWING |
|--|----------------------|-------------|-----------------------|
|--|----------------------|-------------|-----------------------|

4. Suits and administrative proceedings, executions, garnishments and attachments

None



a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| CAPTION OF SUIT AND CASE NUMBER | NATURE OF PROCEEDING | COURT OR AGENCY AND LOCATION | STATUS OR DISPOSITION |
|---|--|---------------------------------|--------------------------|
| 10-CV-01200 Ferrari Financial Services, Inc vs. Gerald Michael Abraham | Lawsuit | Northern District of Illinois | Pending |
| 09-CA-004055 Suncoast Schools Federal Credit Union vs Gerald Abraham | Breach of Contract Lawsuit | Lee County, FL | Pending |
| 09-CA-003433 Putnam Leasing Coumpay LLC vs Bonita Springs Enterprises and Gerald Abraham | Breach of Lease Agreement Lawsuit | Lee County, FL | Pending |
| 09-CA-8352 Chase Bank USA, NA Vs Gerald Abraham | Breach of Contract/Account Stated Lawsuit | Lee County, FL | Pending |
| 10-CA-2655 VW Credit, Inc vs. Gerald Abraham | Lawsuit | Lee County, FL | Pending |

None b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED | DATE OF SEIZURE | DESCRIPTION AND VALUE OF PROPERTY |
|--|-----------------|-----------------------------------|
|--|-----------------|-----------------------------------|

5. Repossessions, foreclosures and returns

None List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF CREDITOR OR SELLER | DATE OF REPOSESSION, FORECLOSURE SALE, TRANSFER OR RETURN | DESCRIPTION AND VALUE OF PROPERTY |
|--|---|-----------------------------------|
|--|---|-----------------------------------|

Ferrari Financial Services
250 Sylvan Ave
Englewood Cliffs, NJ 07632

Suncoast Schools FCU
PO Box 11904
Tampa, FL 33680

Putnam Leasing
300 Main St, Ste 601
Stamford, CT 06901

Volkswagen Credit Inc
PO Box 3
Hillsboro, OR 97123

6. Assignments and Receiverships

None a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF ASSIGNEE | DATE OF ASSIGNMENT | TERMS OF ASSIGNMENT OR SETTLEMENT |
|------------------------------|--------------------|-----------------------------------|
|------------------------------|--------------------|-----------------------------------|

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF CUSTODIAN | NAME AND LOCATION OF COURT CASE TITLE & NUMBER | DATE OF ORDER | DESCRIPTION AND VALUE OF PROPERTY |
|-------------------------------|--|---------------|-----------------------------------|
|-------------------------------|--|---------------|-----------------------------------|

7. Gifts

None List all gifts or charitable contributions made within one year immediately preceding the commencement of this case, except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF PERSON OR ORGANIZATION | RELATIONSHIP TO DEBTOR, IF ANY | DATE OF GIFT | DESCRIPTION AND VALUE OF GIFT |
|--|--------------------------------|--------------|-------------------------------|
|--|--------------------------------|--------------|-------------------------------|

8. Losses

None List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| DESCRIPTION AND VALUE OF PROPERTY | DESCRIPTION OF CIRCUMSTANCES, AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS | DATE OF LOSS |
|-----------------------------------|---|--------------|
| \$2,500,000 | Southeast Capital Ponzi Scheme - Art Seaborne | |

9. Payments related to debt counseling or bankruptcy

None List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

| NAME AND ADDRESS OF PAYEE | DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR | AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY |
|---|---|--|
| Credit Restoration Consultants 13790 NW 4th St, Ste 111 Sunrise, FL 33325 | | \$5,700 |
| Keith Losey, Atty 1500 Colonial Blvd, Ste 105 Ft Myers, FL 33907 | | \$20,000 |

| NAME AND ADDRESS OF PAYEE | DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR | AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY |
|--|---|--|
| Michael Boxerman, Atty 19 LaSalle St, Ste 1500 Chicago, IL 60603 | | \$10,000 |
| Robert Lambert Asset Protection Corp 2456 Calle Aqua Marina San Clamente, CA 92673 | | \$27,000 |
| Steven Stohl | | \$2,500 |
| Michael Potter, Atty 4075 S Durango Dr, #111-58 Las Vegas, NV 89147 | | \$5,700 |
| Christian B. Felden Felden and Felden, P.A. 1415 Panther Lane Suite 326 Naples, FL 34109 | 5/10 | \$10,000.00 |

10. Other transfers

None a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR | DATE | DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED |
|--|------|--|
|--|------|--|

None b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

| NAME OF TRUST OR OTHER DEVICE | DATE(S) OF TRANSFER(S) | AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY |
|-------------------------------|------------------------|---|
|-------------------------------|------------------------|---|

11. Closed financial accounts

None



List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF INSTITUTION | TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE | AMOUNT AND DATE OF SALE OR CLOSING |
|---------------------------------|--|------------------------------------|
|---------------------------------|--|------------------------------------|

12. Safe deposit boxes

None



List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY | NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY | DESCRIPTION OF CONTENTS | DATE OF TRANSFER OR SURRENDER, IF ANY |
|--|---|-------------------------|---------------------------------------|
|--|---|-------------------------|---------------------------------------|

Bank of Florida
Immokalee Rd Branch
Naples, FL

self

Papers

13. Setoffs

None



List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF CREDITOR | DATE OF SETOFF | AMOUNT OF SETOFF |
|------------------------------|----------------|------------------|
|------------------------------|----------------|------------------|

14. Property held for another person

None



List all property owned by another person that the debtor holds or controls.

| NAME AND ADDRESS OF OWNER | DESCRIPTION AND VALUE OF PROPERTY | LOCATION OF PROPERTY |
|---------------------------|-----------------------------------|----------------------|
|---------------------------|-----------------------------------|----------------------|

15. Prior address of debtor

None



If the debtor has moved within the three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

| ADDRESS | NAME USED | DATES OF OCCUPANCY |
|---------|-----------|--------------------|
|---------|-----------|--------------------|

16. Spouses and Former Spouses

None



If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

| NAME |
|------|
|------|

17. Environmental Sites

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None



a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

| SITE NAME AND ADDRESS | NAME AND ADDRESS OF GOVERNMENTAL UNIT | DATE OF NOTICE | ENVIRONMENTAL LAW |
|--------------------------|--|-------------------|----------------------|
|--------------------------|--|-------------------|----------------------|

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None



| SITE NAME AND ADDRESS | NAME AND ADDRESS OF GOVERNMENTAL UNIT | DATE OF NOTICE | ENVIRONMENTAL LAW |
|--------------------------|--|-------------------|----------------------|
|--------------------------|--|-------------------|----------------------|

None

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

| NAME AND ADDRESS OF GOVERNMENTAL UNIT | DOCKET NUMBER | STATUS OR DISPOSITION |
|--|---------------|-----------------------|
|--|---------------|-----------------------|

18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership, sole proprietorship, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

| NAME | LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN | ADDRESS | NATURE OF BUSINESS | BEGINNING AND ENDING DATES |
|----------------|--|---------|----------------------------|-------------------------------|
| Gerald Abraham | | | Self Employed Physician | 35+ years ago to present |

None

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

| NAME | ADDRESS |
|------|---------|
|------|---------|

[Questions 19 - 25 are not applicable to this case]

* * * * *

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date 5/19/10 Signature of Debtor /s/ Gerald Michael Abraham
GERALD MICHAEL ABRAHAM

0 continuation sheets attached

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

DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

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 required under 11U.S.C. §§ 110(b), 110(h), and 342(b); (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 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.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer _____ Social Security No. (Required by 11 U.S.C. § 110(c.) _____
If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs this document.

Address

X _____
Signature of Bankruptcy Petition Preparer Date

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 signed 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. 18 U.S.C. §156.

United States Bankruptcy Court Middle District of Florida

In re Gerald Michael Abraham
Debtor

Case No. _____
(If known)

CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

Certification of [Non-Attorney] Bankruptcy Petition Preparer

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor the attached notice, as required by § 342(b) of the Bankruptcy Code

Printed name and title, if any, of Bankruptcy Petition Preparer
Address:

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.)

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

Certification of the Debtor

I, (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code

Gerald Michael Abraham
Printed Names(s) of Debtor(s)

X /s/ Gerald Michael Abraham 5/19/10
Signature of Debtor Date

Case No. (if known) _____

X _____
Signature of Joint Debtor, (if any) Date

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

American Express
PO Box 297812
Ft Lauderdale, FL 33329

Assoc Investment Corp
PO BOx 3055
Salt Lake City, UT 84110

Audi Financial
c/o VW Credit, Inc
PO Box 3
Hillsboro, OR 97123

Bank of America
PO BOx 17054
Wilmington, DE 19850

Bank of America
PO BOx 17054
Wilmington, DE 19850

Bank of America
PO BOx 17054
Wilmington, DE 19850

Bank of America
PO BOx 17054
Wilmington, DE 19850

Chase
800 Brooksedge Blvd
Westerville, OH 43081

Chase Auto Finance
c/o Allied Internation Credit Corp.
100 E Shore D, 3rd Fl
Glenn Allen, VA 23059

Citi Cards
PO Box 6241
Sioux Falls, SD 57117

Citibank NA
PO BOx 528
Pelham, NY 10803

Diamler Chrysler Financial Services
36455 Corporate Dr
Farmington Hills, MI 48331

Discover Financial Services LLC
PO Box 15316
Wilmington, DE 19850

Ferrari Financial Services
250 Sylvan Ave
Englewood Cliffs, NJ 07632

Fifth Third Bank
5050 Kingsley Dr
Cincinnati, OH 45227

First Premier Bank
601 S Minnesota Ave
Sioux Falls, SD 57104

First USA Bank NA
800 Brooksedge Blvd
Westerville, OH 43081

GMAC
PO Box 380901
Bloomington, MN 55438

Lexus Financial Services
12735 MORris Rd Ext A
Alpharetta, GA 30004

Marylynne K Schwartz
Shaw Gussis Fishman
Glantz Wolfson & Towbin LLC
321 N Clark St, Ste 800
Chicago, IL 60654

Mercedes-Benz Financial
P.O. Box 685
Roanoke, TX 76262

MFI
7181 Garfield Ave
Huntington Beach, CA 92648

Neil Spector
PO BOX 800
Tampa, FL 33601

Nissan Motor Acceptance
PO Box 660360
Dallas, TX 75266

Philip Orsi
1191 E Newport Center Dr, Ste 101
Deerfield Beach, FL 33442

Putnam Leasing
300 Main St, Ste 601
Stamford, CT 06901

Regions
PO BOX 11007
Birmingham, AL 35288

Regions Bank
PO BOX 11007
Birmingham, AL 35288

Regions Bank
PO BOX 11007
Birmingham, AL 35288

Roy L. Weinfield, Esq
800 Brickell Ave, Ste 1501
Miami, FL 33131

Sears
PO Box 6189
Sioux Falls, SD 57117

Steven K. Platzek
399 W Palmetto Park Rd, Ste 100
Boca Raton, FL 33432

Suncoast Bank
PO BOX 11904
Tampa, FL 33680

Suncoast Schools FCU
PO Box 11904
Tampa, FL 33680

Target NB
PO Box 673
Minneapolis, MN 55440

US Bank
PO Box 5227
Cincinnati, OH 45201

US Bank - Alabama Metro Indirect Lending
PO Box 790179
St Louis, MO 63179

Volkswagen Credit Inc
PO Box 3
Hillsboro, OR 97123

Wachovia
PO Box 3117
Winston Salem, NC 27102

Wachovia Bank
PO Box 3117
Winston Salem, NC 27102

Wachovia Bank
PO Box 3117
Winston Salem, NC 27102

STATEMENT OF SOCIAL SECURITY NUMBER(S) OR INDIVIDUAL TAXPAYER IDENTIFICATION NUMBER (ITIN)

United States Bankruptcy Court Middle District of Florida

In re Gerald Michael Abraham, Debtor
Address 27499 Riverview Center Blvd Bonita Springs, FL 34134
Last four digits of Social Security or Individual Taxpayer Identification (ITIN) No(s), (if any): 2581
Employer Tax Identification (EIN) No(s), (if any)

Case No.

Chapter 11

STATEMENT OF SOCIAL SECURITY NUMBER(S) (or other Individual Taxpayer Identification Number(s) (ITIN(s)))

1. Name of Debtor (Last, First, Middle): Abraham, Gerald Michael (Check the appropriate box and, if applicable, provide the required information.)

- Debtor has a Social Security Number and it is : 079-36-2581
Debtor does not have a Social Security Number but has an Individual Taxpayer Identification Number (ITIN), and it is :
Debtor does not have either a Social Security Number or an Individual Taxpayer Identification Number (ITIN).

2. Name of Joint Debtor (Last, First, Middle): (Check the appropriate box and, if applicable, provide the required information.)

- Joint Debtor has a Social Security Number and it is :
Joint Debtor does not have a Social Security Number but has an Individual Taxpayer Identification Number (ITIN), and it is :
Joint Debtor does not have either a Social Security Number or an Individual Taxpayer Identification Number (ITIN).

I declare under penalty of perjury that the foregoing is true and correct.

X /s/ Gerald Michael Abraham 5/19/10
Signature of Debtor Date

X
Signature of Joint Debtor Date

*Joint debtors must provide information for both spouses. Penalty for making a false statement: Fine of up to \$250,000 or up to 5 years imprisonment or both. 18 U.S.C. §§ 152 and 3571

United States Bankruptcy Court Middle District of Florida

In re Gerald Michael Abraham

Case No. _____

Chapter 11

Debtor(s)

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept \$ 10,000.00

Prior to the filing of this statement I have received \$ 10,000.00

Balance Due \$ 0.00

2. The source of compensation paid to me was:

Debtor Other (specify)

3. The source of compensation to be paid to me is:

Debtor Other (specify)

4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
- e. [Other provisions as needed]

Final fee to be based on an hourly rate for all services provided.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in the bankruptcy proceeding.

5/19/10

Date

/s/ Christian B. Felden

Signature of Attorney

Felden and Felden, P.A.

Name of law firm

In re Gerald Michael Abraham
Debtor(s)

Case Number: _____
(If known)

CHAPTER 11 STATEMENT OF CURRENT MONTHLY INCOME

In addition to Schedule I and J, this statement must be completed by every individual Chapter 11 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

| Part I. CALCULATION OF CURRENT MONTHLY INCOME | | | | |
|---|---|---|--------------------------------|--------------------------------|
| 1 | Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed. a. <input checked="" type="checkbox"/> Unmarried. Complete only Column A ("Debtor's Income") for Lines 2-10. b. <input type="checkbox"/> Married, not filing jointly. Complete only Column A ("Debtor's Income") for Lines 2-10. c. <input type="checkbox"/> Married, filing jointly. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 2-10. | | | |
| | All figures must reflect average monthly income received from all sources, derived during the the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you divide the six-month total by six, and enter the result on the appropriate line. | | Column A Debtor's Income | Column B Spouse's Income |
| 2 | Gross wages, salary, tips, bonuses, overtime, commissions. | | \$ 0.00 | \$ |
| 3 | Net income from the operation of a business, profession or farm. Subtract Line b from Line a and enter the difference on Line 3. If more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero | | | |
| | a. | Gross receipts | \$ 9,000.00 | |
| | b. | Ordinary and necessary business expenses | \$ 4,070.00 | |
| | c. | Business Income | Subtract Line b from Line a | |
| | | | \$ 4,930.00 | \$ N.A. |
| 4 | Rents and other real property income. Subtract Line b from Line a and enter the difference on Line 4. Do not enter a number less than zero. | | | |
| | a. | Gross receipts | \$ 0.00 | |
| | b. | Ordinary and necessary operating expenses | \$ 0.00 | |
| | c. | Business Income | Subtract Line b from Line a | |
| | | | \$ 0.00 | \$ N.A. |
| 5 | Interest, dividends and royalties. | | \$ 0.00 | \$ N.A. |
| 6 | Pension and retirement income. | | \$ 0.00 | \$ N.A. |
| 7 | Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by the the debtor's spouse if Column B is completed. | | \$ 0.00 | \$ N.A. |
| 8 | Unemployment compensation. Enter the amount in the appropriate column(s) of Line 8. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below: | | | |
| | Unemployment compensation claimed to be a benefit under the Social Security Act | Debtor \$ 0.00 | Spouse \$ N.A. | |
| | | | \$ 0.00 | \$ N.A. |

| | | | | |
|---------------------------|--|--|-------------|---------|
| 9 | Income from all other sources. If necessary, list additional sources on a separate page. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism. Specify source and amount. | | | |
| | a. | | \$ 0.00 | |
| | b. | | \$ 0.00 | |
| Total and enter on Line 9 | | | \$ 0.00 | \$ N.A. |
| 10 | Subtotal of current monthly income. Add Lines 2 thru 9 in Column A, and, if Column B is completed, add Lines 2 through 9 in Column B. Enter the total(s). | | \$ 4,930.00 | \$ N.A. |
| 11 | Total Current Monthly. If Column B has been completed, add Line 10, Column A to Line 10, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 10, Column A. | | \$ 4,930.00 | |

Part VIII: VERIFICATION

| | | | |
|----|--|--|------------------------|
| 12 | I declare under penalty of perjury that the information provided in this statement is true and correct. <i>(If this a joint case, both debtors must sign.)</i> | | |
| | Date: <u>5/19/10</u> | Signature: <u>/s/ Gerald Michael Abraham</u> | (Debtor) |
| | Date: _____ | Signature: _____ | (Joint Debtor, if any) |

STATEMENT OF SOCIAL SECURITY NUMBER(S) OR INDIVIDUAL TAXPAYER IDENTIFICATION NUMBER (ITIN)

United States Bankruptcy Court Middle District of Florida

In re Gerald Michael Abraham, Debtor
Address 27499 Riverview Center Blvd Bonita Springs, FL 34134
Last four digits of Social Security or Individual Taxpayer Identification (ITIN) No(s), (if any): 2581
Employer Tax Identification (EIN) No(s), (if any)

Case No.

Chapter 11

STATEMENT OF SOCIAL SECURITY NUMBER(S) (or other Individual Taxpayer Identification Number(s) (ITIN(s)))

1. Name of Debtor (Last, First, Middle): Abraham, Gerald Michael (Check the appropriate box and, if applicable, provide the required information.)

- Debtor has a Social Security Number and it is : 079-36-2581
Debtor does not have a Social Security Number but has an Individual Taxpayer Identification Number (ITIN), and it is :
Debtor does not have either a Social Security Number or an Individual Taxpayer Identification Number (ITIN).

2. Name of Joint Debtor (Last, First, Middle): (Check the appropriate box and, if applicable, provide the required information.)

- Joint Debtor has a Social Security Number and it is :
Joint Debtor does not have a Social Security Number but has an Individual Taxpayer Identification Number (ITIN), and it is :
Joint Debtor does not have either a Social Security Number or an Individual Taxpayer Identification Number (ITIN).

I declare under penalty of perjury that the foregoing is true and correct.

X /s/ Gerald Michael Abraham 5/19/10
Signature of Debtor Date

X
Signature of Joint Debtor Date

*Joint debtors must provide information for both spouses. Penalty for making a false statement: Fine of up to \$250,000 or up to 5 years imprisonment or both. 18 U.S.C. §§ 152 and 3571