B1 (Official Form	1)	(1/08)
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United States Bankruptcy Court Southern District of Florida									luntary Petition
Name of Debtor (if individual, enter Last, First, Mic Florida Housing Corporation		Name of Joint Debtor (Spouse) (Last, First, Middle):							
All Other Names used by the Debtor in the last 8 ye (include married, maiden, and trade names): dba Palm Beach Assisted Living Facili		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 EIN (if more than one, state all): 65-0764109	I.D. (ITIN)	No./Complete		Last four d EIN (if mo	-			°axpayer I	I.D. (ITIN) No./Complete
Street Address of Debtor (No. & Street, City, State 534 Datura Street	& Zip Code):		Street Add	ress of Jo	int Deb	tor (No. & Stree	et, City, S	State & Zip Code):
West Palm Beach, FL	ZIPCOD	E 33401]	ZIPCODE
County of Residence or of the Principal Place of Bu Palm Beach	isiness:			County of I	Residence	e or of t	he Principal Pla	ce of Bus	siness:
Mailing Address of Debtor (if different from street a	address)			Mailing Ac	dress of .	Joint De	ebtor (if differer	nt from st	reet address):
	ZIPCOD	E						[ZIPCODE
Location of Principal Assets of Business Debtor (if	different fro		s abov	/e):					L
534 Datura Street, West Palm Beach, F	۶L								ZIPCODE 33401
Type of Debtor (Form of Organization)		Nature o (Check							y Code Under Which d (Check one box.)
(Check one box.) ☐ Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> ✔ Corporation (includes LLC and LLP) ☐ Partnership ☐ Other (If debtor is not one of the above entities, check this box and state type of entity below.)	☐ Single Asset Real Estate as defined in 11 ☐ Chapter 9 1 U.S.C. § 101(51B) ☑ Chapter 11 1 ☐ Railroad ☐ Chapter 12 0 ☐ Stockbroker ☐ Chapter 13 1 ies, ☐ Commodity Broker ☐				Re Ma Ch Re No	 Chapter 15 Petition for Recognition of a Foreign Main Proceeding Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding 			
	· Oth · · · · · · · · · · · · · · · · · · ·	er Tax-Exe (Check box, otor is a tax-exen	Tax-Exempt Entity Debts are prima: Check box, if applicable.) \$ 101(8) as "incu a tax-exempt organization under individual prima: of the United States Code (the personal, family,				bbts are primaril bts, defined in 1 01(8) as "incurr ividual primaril sonal, family, o	1 U.S.C. red by an ly for a	ne box.) her Debts are primarily business debts.
 Full Filing Fee attached Filing Fee to be paid in installments (Applicable tattach signed application for the court's consideration is unable to pay fee except in installments. Rule 1 3A. 	id in installments (Applicable to individuals only). Must cation for the court's consideration certifying that the debtor e except in installments. Rule 1006(b). See Official Form requested (Applicable to chapter 7 individuals only). Must cequested (Applicable to chapter 7 individuals only). Must						n 11 U.S.C. § 101(51D). s owed to non-insiders or		
				Accepta	nces of th	e plan v	this petition vere solicited pr vith 11 U.S.C. §		
Debtor estimates that funds will be available for	Debtor estimates that funds will be available for distribution to unsecured creditors. COU Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for							THIS SPACE IS FOR COURT USE ONLY	
Estimated Number of Creditors Image: Strain of Creditors <td>000-</td> <td>5,001- 10,000</td> <td>10,00 25,00</td> <td></td> <td>25,001- 50,000</td> <td></td> <td>50,001- 100,000</td> <td>□ Over 100,000</td> <td>)</td>	000-	5,001- 10,000	10,00 25,00		25,001- 50,000		50,001- 100,000	□ Over 100,000)
		\$10,000,001 to \$50 million		0,000,001 to \$100,000,001 \$500,000,001 More to \$500 million to \$1 billion \$1 bi		More th \$1 billio			
Estimated Liabilities State State <		\$10,000,001 to \$50 million		000,001 to million	\$100,00 to \$500		5500,000,001 to \$1 billion	More the \$1 billion	

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Voluntary Petition (This page must be completed and filed in every case)	Name of Debtor(s): Florida Housing Co	rporation
(This page must be completed and filed in every case) Prior Bankruptcy Case Filed Within Last 8	_	
Location	Case Number:	Date Filed:
Where Filed: None	Cuse rumber.	Duce Thea.
Location Where Filed:	Case Number:	Date Filed:
Pending Bankruptcy Case Filed by any Spouse, Partner or	Affiliate of this Debto	or (If more than one, attach additional sheet)
Name of Debtor: None	Case Number:	Date Filed:
District:	Relationship:	Judge:
Exhibit A (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)	whose de I, the attorney for the pe that I have informed th chapter 7, 11, 12, or explained the relief ava	Exhibit B ompleted if debtor is an individual bts are primarily consumer debts.) etitioner named in the foregoing petition, declare e petitioner that [he or she] may proceed under 13 of title 11, United States Code, and have uilable under each such chapter. I further certify debtor the notice required by § 342(b) of the Debtor(s)
Exhi Does the debtor own or have possession of any property that poses or is a		imminent and identifiable harm to public health
or safety?		1
 ☐ Yes, and Exhibit C is attached and made a part of this petition. ☑ No 		
Exhi (To be completed by every individual debtor. If a joint petition is filed, ex Exhibit D completed and signed by the debtor is attached and ma If this is a joint petition: Exhibit D also completed and signed by the joint debtor is attached	ach spouse must complete de a part of this petition.	-
Information Regardin	ng the Debtor - Venue	
•	oplicable box.) of business, or principal as	ssets in this District for 180 days immediately
There is a bankruptcy case concerning debtor's affiliate, general	partner, or partnership pe	nding in this District.
Debtor is a debtor in a foreign proceeding and has its principal pl or has no principal place of business or assets in the United States in this District, or the interests of the parties will be served in reg	but is a defendant in an ac	tion or proceeding [in a federal or state court]
Certification by a Debtor Who Reside		dential Property
(Check all app Landlord has a judgment against the debtor for possession of deb	licable boxes.) tor's residence. (If box cl	necked, complete the following.)
(Name of landlord or less	or that obtained judgment	
(Address of lan	dlord or lessor)	
Debtor claims that under applicable nonbankruptcy law, there are the entire monetary default that gave rise to the judgment for post		
Debtor has included in this petition the deposit with the court of a filing of the petition.	any rent that would becor	ne due during the 30-day period after the

Case	08-25324-PGH	Do
0400	00 2002 11 011	

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B1 (Official Form 1) (1/08)	Page 3
Voluntary Petition (This page must be completed and filed in every case)	Name of Debtor(s): Florida Housing Corporation
Signa	itures
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 State Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. X Signature of Debtor X Signature of Joint Debtor Date	Signature of a Foreign Representative I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition. (Check only one box.) I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached. Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached. X
Signature of Attorney* X /s/Julianne R. Frank, Esquire Signature of Attorney for Debtor(s) Julianne R. Frank, Esquire 315745 Printed Name of Attorney for Debtor(s) Frank, White-Boyd, P.A. Firm Name 11382 Prosperity Farms Rd., #230 Address Palm Beach Gardens, FL 33410 (561) 626-4700 Telephone Number October 15, 2008 Date *In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.	Signature of Non-Attorney 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); 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached. Printed Name and title, if any, of Bankruptcy Petition Preparer Social Security Number (If the bankruptcy petition preparer is not an individual, state the social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.) Address
Signature of Debtor (Corporation/Partnership) I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor. The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition. X /s/ Joseph Glucksman Signature of Authorized Individual Joseph Glucksman Ninted Name of Authorized Individual President Title of Authorized Individual October 15, 2008 Date	X Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above. 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 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.

Debtor(s)

United States Bankruptcy Court Southern District of Florida

IN RE:

Florida Housing Corporation

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).

<u> </u>				
(1) Name of creditor and complete mailing address including zip code	(2) Name, telephone number and complete mailing address, including zip code, of employee, agent or department of creditor familiar with claim who may be contacted	(3) Nature of claim (trade debt, bank loan, government contract, etc.)	 (4) Indicate if claim is contingent, unliquidated, disputed or subject to setoff 	(5) Amount of claim (if secured also state value of security)
Contact Property Management C/O D. Mandel 7251 W. Palmetto Park Rd., Ste. 306 Boca Raton, FL 33433		Secured by 534 Datura Street	Unliquidated Disputed	1,182,715.00 Collateral: 3,643,464.00 Unsecured: 1,182,715.00
South Florida Affordable Housing Corporation 6521 NW 34th Ave. Ft. Lauderdale, FL 33309		Loan		1,001,718.00
CapMark Finance Inc. Thomas M. Wainscott - Vice President 700 No Pearl Street, #2200 Dallas, TX 75201		534 Datura St.(mortgage)	Unliquidated Disputed	4,500,000.00 Collateral: 4,174,571.73 Unsecured: 325,428.27
Wachovia Bank, NA Commercial Loan Payment Center PO Box 740502 Atlanta, GA 30374-0502		Secured by 534 Datura Street	Unliquidated Disputed	135,048.83 Collateral: 3,643,464.00 Unsecured: 135,048.83
PBC Commission On Affordable Housing C/O HCD Board Of County Commission 301 No. Olive Ave. West Palm Beach, FL 33401		Secured by 534 Datura Street	Unliquidated Disputed	134,911.00 Collateral: 3,643,464.00 Unsecured: 134,911.00
Wachovia Bank NA Commercial Loan Payment Center P.O. Box 740502 Atlanta, GA 32202		Secured by 534 Datura Street	Unliquidated Disputed	93,010.30 Collateral: 3,643,464.00 Unsecured: 93,010.30
West Palm Beach CRA 200 Second Street, Finance West Palm Beach, FL 33401		Secured by 534 Datura Street	Unliquidated Disputed	68,394.00 Collateral: 3,643,464.00 Unsecured: 68,394.00
South Florida Affordable Housing Corporation 6521 NW 34th Ave. Ft. Lauderdale, FL 33309		Line of credit		47,250.00
Richard Walsh C/O Florida Housing Corporation 534 Datura Street		Resident Refund	Disputed	20,144.00
West Palm Beach, FL 33401 Robert Ostrander NO KNOWN ADDRESS		Resident Refund	Disputed	19,037.00

Irene Brown	Resident	Disputed	17,171.00
NO KNOWN ADDRESS	Refund		
Evelyn Strobel	Resident	Disputed	15,025.00
2 Citrus Dr.	Refund		
Riviera Beach, FL 33404			
Mary Hunter	Resident	Disputed	13,584.00
C/O Florida Housing Corporation	Refund	-	
534 Datura Street			
West Palm Beach, FL 33401			
Ethel Draper	Resident	Disputed	13,197.00
NO KNOWN ADDRESS	Refund	-	·
Wesley Rivers	Resident	Disputed	12,949.00
NO KNOWN ADDRESS	Refund	•	,
Samuel Melamed	Resident	Disputed	11,951.00
NO KNOWN ADDRESS	Refund	-	·
Rose Greynolds	Resident	Disputed	9,082.00
1708 NE 4th Street	Refund	•	
Boynton Beach, FL 33436			
Patricia Sarle	Resident	Disputed	8,248.00
NO KNOWN ADDRESS	Refund	-	,
David Horowitz	Resident	Disputed	7,620.00
NO KNOWN ADDRESS	Refund	•	,
Oscar McKinney	Resident	Disputed	7,607.00
NO KNOWN ADDRESS	Refund	•	,

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

I, [the president *or* other officer *or* an authorized agent of the corporation][*or* a member *or* an authorized agent of the partnership] named as the debtor in this case, declare under penalty of perjury that I have read the foregoing list and that it is true and correct to the best of my information and belief.

Date: October 15, 2008

Signature: /s/ Joseph Glucksman

Joseph Glucksman, President

(Print Name and Title)

Document 1 Filed 10/15/2008

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United States Bankruptcy Court Southern District of Florida

IN RE:

Case No.

Florida Housing Corporation

Chapter 11

SUMMARY OF SCHEDULES

Debtor(s)

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 also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NUMBER OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$ 3,643,464.00		
B - Personal Property	Yes	7	\$ 546,632.73		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	2		\$ 6,121,074.99	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		\$ 0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	9		\$ 1,992,655.68	
G - Executory Contracts and Unexpired Leases	Yes	2			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	No				\$
J - Current Expenditures of Individual Debtor(s)	No				\$
	TOTAL	26	\$ 4,190,096.73	\$ 8,113,730.67	

Case 08-25324-PGH B6A (Official Form 6A) (12/07)

IN RE Florida Housing Corporation

Debtor(s)

Case No.

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(If known)

SCHEDULE A - REAL PROPERTY

Filed 10/15/2008

Document 1

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 cotenant, 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 the 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 DEBTORS INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
Real property: 534 Datura Street, West Palm Beach, FL 33401 (4 story assisted living facility) <i>alk/a</i> The West half of Lot 4, less the North 10 feet thereof, and Lot 5, less the North 7.85 feet thereof, Block 23, Town of West Palm Beach, according to the Plat thereof, on file in the Office of the Clerk of the Circuit Court in and for Palm Beach County, Florida, recorded in Plat Book 1, Page 2.	Fee Simple	н	3,643,464.00	6,114,079.13
	тот		3,643,464.00	

Case 08-25324-PGH B6B (Official Form 6B) (12/07)

IN RE Florida Housing Corporation

Debtor(s)

Case No.

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(If known)

SCHEDULE B - PERSONAL PROPERTY

Filed 10/15/2008

Document 1

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the 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 is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

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

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply 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).

	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
1.	Cash on hand.		Petty cash (estimated)		800.00
2.	Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit		Wachovia Bank 450 S. Australian Ave. West Palm Beach, FL 33401 Checking Account 1 #2000143741664		140,214.61
	unions, brokerage houses, or cooperatives.		Wachovia Bank 450 S. Australian Ave. West Palm Beach, FL 33401 Checking Account 2 (Resident funds) #2000143742100		593.04
			Wachovia Bank 450 S. Australian Ave. West Palm Beach, FL 33401 Checking Account 3 (Corporate) #015402248		1,569.30
3.	Security deposits with public utilities, telephone companies, landlords, and		City of West Palm Beach, 200 2nd St., West Palm Beach, FL 33401		11,615.00
	others.		Florida Power & Light, Juno Beach, Florida		15,752.00
			Florida Public Utilities, 401 So. Dixie Hwy., West Palm Beach, FL 33401		2,800.00
4.	Household goods and furnishings, include audio, video, and computer equipment.	X			
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6.	Wearing apparel.	X			
	Furs and jewelry.	X			
8.	Firearms and sports, photographic, and other hobby equipment.	X			
9.	Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	x			
10.	Annuities. Itemize and name each issue.	x			

_____ Case No. _____

(If known)

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

Debtor(s)

		-			
	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
	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			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.		Florida Housing Health Care, Inc 100% - unknown value		unknown
	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16.	Accounts receivable.		- City of West Palm Beach (Face Value \$37,938 Expected Value \$37,938) HOPWA Service Grant Reimbursment for August and September 2008		37,938.00
			- Palm Beach County (Face Value \$20,000 Expected Value \$15,000) ESGP Service Grant for 2007-08		15,000.00
			- Palm Beach County (Face Value \$3,124.68 Expected Value \$3,124.68) Financially Assisted Agency Service Grant for August 2008		3,124.68
			- Palm Beach County (Face Value \$4,078.10 Expected Value \$4,078.10) Ryan White Service Grant for August 2008		4,078.10
			- Palm Beach County (Face Value \$5,978 Expected Value \$5,978) CDBG Service Grant for August and September 2008		5,978.00
			- US Dept of HUD (Face Value \$79,961.00 Expected Value \$40,000) SHP Service Grant for June 2008		40,000.00
			Rent Owed - Residents of Palm Beach ALF (Face Value \$144,912.00 Expected Value \$59,162.00) Rent owed for tenancy includes Medicaid funding, private pay, etc.		59,162.00
17.	Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars.	x			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			

Case 08-25324-PGH B6B (Official Form 6B) (12/07) - Cont.

IN RE Florida Housing Corporation

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

Filed 10/15/2008

TYPE OF PROPERTY	N O D N E DESCRIPTION AND LOCATION OF PROPERTY E	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
 Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each. Patents, copyrights, and other intellectual property. Give particulars. Licenses, franchises, and other general intangibles. Give particulars. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by 	x x x x x x		
 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. 25. Automobiles, trucks, trailers, and other vehicles and accessories. 	2003 Chevy Tahoe VIN#1GNEC13Z73J292152 99,999 miles (held jointly w/ principal, Joseph Glucksman) 2003 Honda Odyssey LX VIN#5FNRL18533B134690 148,765 miles (held jointly w/ principal, Joseph Glucksman)	J	8,525.00 7,000.00
 Boats, motors, and accessories. Aircraft and accessories. Office equipment, furnishings, and supplies. Machinery, fixtures, equipment, and supplies used in business. Inventory. Animals. Crops - growing or harvested. Give particulars. Farming equipment and implements. Farm supplies, chemicals, and feed. Other personal property of any kind not already listed. Itemize. 	X X Office equipment, furnishings and supplies *see attached X X X X X X X X X X X X X X X X X X X	J	192,483.00

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_ Case No. _

Debtor(s)

Document 1

546,632.73

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

TOTAL

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Page 11 of 71 SCHEDULE #B28

Florida Housing Corporation

Palm Beach Assisted Living Facility 534 Datura Street West Palm Beach, Florida 33401

RESIDENTIAL FURNISHINGS:

DESCRIPTION	# .	LOCATION	VALUE
Bed w/ Mattress and Frame	189	150	28,350
Dresser	121	50	6,050
Night Stand	103	15	1,545
Lamp	96	15	1,440
Chair	, 85	35	2,975
Wall Mounted Mirror	115	17	1,955
Wall Pictures (2)	131	30	3,930
Curtains/Blinds	245	37	9,065
Ceiling Fans	140	20	2,800
TOTALS		369/resident	58,110

LAUNDRY:

DESCRIPTION	#	LOC	VALUE	
50 LB Unimat Washers/Extractors	3	Laundry	2750/@	8,250
60 LB Unimat Gas Operated Dryers	3	Laundry	2083/@	6,249
Assorted Laundry Carts	4	Laundry	200/	800
TOTALS				15,299

OFFICE EQUIPMENT:

DESCRIPTION	#	Location	VALUE
Computers:			
Dell Model X10-23534	1	142	500
E Series Model #MFATXPNT	1	143	500
E-Series Model MDWE4100P4H	1	144	500
Gateway Model #3000s	1	140	500
Dell Model #34RXX21	1	135	1,000
Compac Model #ML370 (Server)	1	135	750
Plexwriter Model #12/10/32A	1	137	500
Gateway Model #550GH	1	420	1,000
IBM Model #814822U	1	2 nd Floor Nursing	500
52XMAX Model # CPU216	1	Food Service: 141	500

`1

Printers:			0
HP Desk Jet Model 6122	1	142	100
Samsung Printer Model # ML-2510	1	144	100
HP LaserJet 1300	1	143	150
HP LaserJet 1320	1	135	150
Dell ON5819	1	137	150
DeskJet D4160	1	2 nd Floor Nursing	125
HP DeskJet 5550	1	Food Service: 141	125
Copiers:			0
Cannon MF6530	1	142	0
Fax Machines:			0
Brother 2820	1	142	200
Brother 2820	1	Sunshine	200
?	1	137	0
Misc.:			0
Lateral and Vertical File cabinets	8	[^] 135/137/138/143/1 44/146	400
Executive Credenzas	5	137/143/144/146/1 42	250
Work Stations	10	138/135/137/141/1 43/140/142/144/14 6/420	750
TOTALS			8,950

MISCELLANEOUS:

DESCRIPTION	#	LOCATION	VALUE
TVs:			
52 inch RCA Television Set	1	Gathering Room	250
36" Toshiba TV	1	2 nd Floor Common	300
		Area	
Systems:			0
ADP Fire Early Warning System Model	1	Equipment Room	12,916
FTD 3600			· .
Sonitrol Security System	1	Equipment Room	1,583
Panasonic DBS 96 Port w/CPS 288	1	Equipment Room	18,040
Telephone System			
Refridgerators:			0
Haier #H2B02	1	Sunshine	50
Daewood #FR143R	1	Sunshine	25
Haier HSQU4WNAWW	1	Nursing 2 nd Floor	25
Excellence ERS200	1	Nursing 2 nd Floor	50
GE Model TWF2WNNW	1	Nursing 2 nd Floor	75
Reception:			0
Reception Station	1	Front Door	100

Various Chairs	6	Front Door	150
Various Tables	3	Front Door	75
			0
Gathering Room:		-	0
Couches		Various	500
Chairs		Various	500
Vending Machines (leased)	3	Soda/snack	0
25 Ft Conference/Activity Table	1	Gathering Room	100
Pay Telephone	1	Gathering Room	0
Wall Unit with shelves and cabinets		Gathering Room	250
TOTALS		· · · · · ·	34,989

FOOD SERVICE:

DESCRIPTION	#	LOCATION	VALUE
Garland Convection Oven Model TG2A	1.	Kitchen	841
SouthBend Top Range, 3 Ovens, Griddle Model 13620	1	Kitchen	5,250
SouthBend Deep Fryer Model 14-36	1	Kitchen	100
Stainless Table	2	Kitchen	566
Steam Table	1	Kitchen	525
True Fridge Model T49	1	Food Storage	833
True Freezer Model F49	1	Food Storage	916
Scottsman Ice Maker w/ storage Model CME506AE-18	1	Dishwasher Area	1,416
Haier Microwave Oven	1	Kitchen	25
Daewood Microwave Oven	. 1	Kitchen	25
Assorted Pots and Utensils			300
Ecolab Dishwasher Model ES2000 (leased)	1	Dishwashing	
Hobart Slicer Model FBT80	1	Kitchen	300
Toaster	1	Kitchen	200
McCall Reach In Fridge Model# 7-70T	1	Kitchen	833
Continental Reach In Freezer Model# 2F	1	Food Storage	916
Curtis Coffee Maker GEM12	1	Dining Room	90
Bunn Ice Tea Maker 1312	1	Dining Room	50
Dining Room Tables (rounds & squares)	19	Dining Room	1,140
Dining Room Chairs	64	Dining Room	2,240
TOTALS			5,769

3

MAINTENANCE & HOUSEKEEPING

DESCRIPTION	#	LOCATION	VALUE
Diesel Operated Generac 176KW	1	Parking Lot	18,166
Emergency Generator			
Emerson 7000 BTU A/C's Model 7GC72H	150	Residential Rooms	7,500
or other window unit			
3 Ton Emerson Wall Mounted A/C Unit	4	Various 1 st Floor	1,200
		Locations	
Otis Passenger Elevator 2000 lbs	1	Central	37,000
Otis Freight Elevator	1	South	2,500
AO Smith 100 gal Hot Water Heater;	2	East Basement	3,000
275,000 BTU's; Model 72110-3	1		
TOTALS	 		69,366

OTHER

GRAND TOTAL

\$192,483.

NOTE: Value has been estimated at current condition. Replacement value would be much higher.

9/16/08

Providing Housing & Supportive Services To Those In Need

4

Debtor(s)

Case No.

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(If known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

Filed 10/15/2008

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 the 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 the 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 AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions Above.)	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.			April 1998	┢	x	Х	4,500,000.00	325,428.27
CapMark Finance Inc. Thomas M. Wainscott - Vice President 700 No Pearl Street, #2200 Dallas, TX 75201			Mortgage on 534 Datura and UCC-1 Non-Recourse Obligation VALUE \$ 4,174,571.73					
ACCOUNT NO.			August 2001	┢	x	x	1,182,715.00	1,182,715.00
Contact Property Management C/O D. Mandel 7251 W. Palmetto Park Rd., Ste. 306 Boca Raton, FL 33433			Mortgage on 534 Datura Street				1,102,110.00	1,102,110.00
			VALUE \$ 3,643,464.00	+	\vdash			
ACCOUNT NO. GMAC Processing Center Post Office Box 70309 Charlotte, NC 28272-0309			Loan on 2003 Chevy Tahoe (8/22/2003)				6,995.86	
ACCOUNT NO.			VALUE \$ 8,525.00 Loan Secured by 534 Datura Street	┼	x	x	134,911.00	134,911.00
PBC Commission On Affordable Housing C/O HCD Board Of County Commission 301 No. Olive Ave. West Palm Beach, FL 33401			(12/31/2002) VALUE \$ 3,643,464.00					
				Sut	btot	Lal		
1 continuation sheets attached			(Total of t				\$ 5,824,621.86	\$ 1,643,054.27
			(Use only on l		Tot pag		\$ (Report also on Summary of Schedules.)	\$ (If applicable, report also on Statistical Summary of Certain

Case 08-25324-PGH Document 1 B6D (Official Form 6D) (12/07) - Cont.

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IN RE Florida Housing Corporation

Debtor(s)

_ Case No. ___

(If known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS (Continuation Sheet)

			(Continuation Sheet)					
CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions Above.)	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.			Attorney for CapMark Finance Inc.					
Ruden McClosky Attn: Richard H. Malchon Jr. 401 East Jackson Street; Suite 2700 Tampa, FL 33602			VALUE \$	_				
ACCOUNT NO.	Х		Loan #2 Secured by 534 Datura Street		Х	Х	93,010.30	93,010.30
Wachovia Bank NA Commercial Loan Payment Center P.O. Box 740502 Atlanta, GA 32202			October 2004 VALUE \$ 3,643,464.00					
			Loan #1 Secured by Mortgage on 534	+	v	Х	135,048.83	135,048.83
ACCOUNT NO. Wachovia Bank, NA Commercial Loan Payment Center PO Box 740502 Atlanta, GA 30374-0502			Datura Street October 2004		Â	^	133,046.63	133,046.63
			VALUE \$ 3,643,464.00					
ACCOUNT NO. West Palm Beach CRA 200 Second Street, Finance West Palm Beach, FL 33401			October 2002 Loan Secured by Mortgage on 534 Datura Street		х	X	68,394.00	68,394.00
			VALUE \$ 3,643,464.00					
ACCOUNT NO.			VALUE \$					
ACCOUNT NO.			VALUE \$					
Sheet no. 1 of 1 continuation sheets attache	ed 1	to	· - *	Sul	otot	al		
Schedule of Creditors Holding Secured Claims			(Total of t				\$ 296,453.13	\$ 296,453.13
			(Use only on)		Tot pag		\$ 6,121,074.99 (Report also on	\$ 1,939,507.40 (If applicable, report

(Report also on Summary of Schedules.)

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

B6E (Official Form 6E) (12/07)

IN RE Florida Housing Corporation

Debtor(s)

Case No. _

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(If known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

Filed 10/15/2008

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 the 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 "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Cours.)

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 <u>not</u> 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.

 \checkmark 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 $10,950^{\circ}$ 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).

Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$5,400* 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 \$2,425* 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 April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

0 continuation sheets attached

Case 08-25324-PGH Document 1

B6F (Official Form 6F) (12/07)

IN RE Florida Housing Corporation

Debtor(s)

Case No. _

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(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

Filed 10/15/2008

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 the 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 nonpriority claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	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.			HUD OVER PAYMENT		Γ	Х	
Alfred Sapp NO KNOWN ADDRESS							
							4,805.00
ACCOUNT NO. Alma Bing NO KNOWN ADDRESS			HUD OVER PAYMENT			X	
ACCOUNT NO. 4001			Revolving credit card charges				2,621.00
American Express P.O. Box 360001 Ft. Lauderdale, FL 33336-0001							
ACCOUNT NO. 1008			Revolving credit card charges			-	110.00
American Express P.O. Box 360001 Ft. Lauderdale, FL 33336-0001							1,585.21
8 continuation sheets attached		1	(Total	-	pag	e)	\$ 9,121.21
			(Use only on last page of the completed Schedule F. Ro the Summary of Schedules and, if applicable, on the	port als		m	

the Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

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Debtor(s)

_ Case No. _

(If known)

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

		(continuation sheet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	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.			Marketing			x	
American Hospitals Patient Guide Post Office Box 131 Schenectady, NY 12301							736.50
ACCOUNT NO.	x		Litigation dispute (see SOFA #4)	x	Х	x	730.30
Angel Aids Center, Inc. C/O Law Offices Of Geoffrey D. Ittleman 2500 Hollywood Blvd., Ste. 309 Hollywood, FL 33020							unknown
ACCOUNT NO.			HUD OVER PAYMENT			x	
Ann Pellman NO KNOWN ADDRESS							
ACCOUNT NO.			Repairs	-		\rightarrow	4,910.00
Best Com 1560 Latham Rd., Ste. #3 West Palm Beach, FL 33409							175.00
ACCOUNT NO. 9680			Revolving credit card charges	+			
Capital One Visa P.O. Box 85184 Richmond, VA 23285-5184							
ACCOUNT NO.			HUD OVER PAYMENT	-		x	170.20
Carolyn Burns NO KNOWN ADDRESS							
							5,906.00
ACCOUNT NO. Clayton Exterminating 14120 82nd Lane North Loxahatchee, FL 33470			Pest control				
							200.00
Sheet no1 of8 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of th	-)	\$ 12,097.70
			(Use only on last page of the completed Schedule F. Report the Summary of Schedules, and if applicable, on the S	t als	0 0	n	t.

ry of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.) \$ ne Summ

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IN RE Florida Housing Corporation

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Debtor(s)

_ Case No. _

(If known)

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

		(continuation Sheet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	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. 7013			Cable services	╈			
Comcast Post Office Box 105184 Atlanta, GA 30348-5184							29.54
ACCOUNT NO.			HUD OVER PAYMENT	+		X	29.54
Dale Slaughter NO KNOWN ADDRESS						~	
ACCOUNT NO.			HUD OVER PAYMENT			x	5,141.00
David Horowitz NO KNOWN ADDRESS						^	
ACCOUNT NO. 5150			Overnight postal services	-			7,620.00
DHL Express Post Office Box 277290 Atlanta, GA 30384							101.08
ACCOUNT NO.	t		HUD OVER PAYMENT	┢		x	101.00
Diana Roberts NO KNOWN ADDRESS							
ACCOUNT NO.	-		Loan (May 2007)				3,835.00
Dina Schwartz 125 Ocean Ave., Apt. 406 Palm Beach Shores, FL 33404							
ACCOUNT NO.	$\left \right $		Maintenance	+		$\left \right $	268,582.00
Du-All Sewer And Drain 509 South "H" Street Lake Worth, FL 33460							
						Ļ	150.00
Sheet no. 2 of 8 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of t		age	e)	\$ 285,458.62
			(Use only on last page of the completed Schedule F. Report the Summary of Schedules, and if applicable, on the S	rt als		n	

the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.) \$

Case 08-25324-PGH Document 1 B6F (Official Form 6F) (12/07) - Cont.

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IN RE Florida Housing Corporation

Debtor(s)

_ Case No. ____

(If known)

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

		· ·				_	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	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. 7555			Dishwasher Lease				
Ecolab Post Office Box 905327 Charlotte, NC 28290-5327							202.27
ACCOUNT NO.	-		HUD OVER PAYMENT	-		х	292.27
Ethel Draper NO KNOWN ADDRESS							10 107 00
ACCOUNT NO.	-		HUD OVER PAYMENT	-		x	13,197.00
Evelyn Strobel 2 Citrus Dr. Riviera Beach, FL 33404							15,025.00
ACCOUNT NO.	\vdash		HUD OVER PAYMENT			Х	13,023.00
Fernando Rojas NO KNOWN ADDRESS							5,787.00
ACCOUNT NO.			Food				0,101100
Gordan Food Service Post Office Box 40472 Atlanta, GA 31192-0472							2 8 4 9 9 7
ACCOUNT NO.	┢		HUD OVER PAYMENT	+		Х	3,849.97
Hans Schwartz NO KNOWN ADDRESS							
ACCOUNT NO.	╞		House Keeping Services	\vdash	_		1,914.00
Health Care Services Group Inc. 3220 Tillman Dr.; Suite 300 Bensalem, PA 19020							
							6,891.82
Sheet no. <u>3</u> of <u>8</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of the			e)	<u>\$</u> 46,957.06
			(Use only on last page of the completed Schedule F. Repor the Summary of Schedules, and if applicable, on the S	t als	0 0	n	

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

Debtor(s)

Case No.

(If known)

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

			,	_		_	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	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.			Litigation dispute (see SOFA #4)	x	х	x	
Henry Robinson, Estate Of Julia Robinson C/O F. Shields McManus, Esq. 221 East Osceola Street Stuart, FL 34994							unknown
ACCOUNT NO.			Liability Insurance	┢			
Imperial Premium Finance Inc. P.O. Box 9045 New York, NY 10087-9045							4,778.79
ACCOUNT NO.			HUD OVER PAYMENT	+		х	4,770.79
Irene Brown NO KNOWN ADDRESS							
ACCOUNT NO.			HUD OVER PAYMENT			X	17,171.00
Jennifer Richardson 3805 Broadway Apt. 136 West Palm Beach, FL 33401							4 077 00
ACCOUNT NO.			HUD OVER PAYMENT			x	4,977.00
John Colson NO KNOWN ADDRESS							
ACCOUNT NO.			Supplies				6,460.00
Johnston Supply 5620 NW 12th Ave., Ste 101 Ft. Lauderdale, FL 33309							
	-						77.85
ACCOUNT NO. Joseph Adino C/O Florida Housing Corporation 534 Datura Street West Palm Beach, FL 33404			HUD OVER PAYMENT			x	474 00
Sheet no4 of8 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of th	-	age	e)	471.32 \$ 33,935.96
			(Use only on last page of the completed Schedule F. Repor the Summary of Schedules, and if applicable, on the S Summary of Certain Liabilities and Relate	t als tatis	tic	on al	\$

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Debtor(s)

_____ Case No. __

(If known)

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

			,				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	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.			HUD OVER PAYMENT	+		Х	
Kristen Friedman NO KNOWN ADDRESS	-						
				_			1,965.00
ACCOUNT NO.			Loan #1 (12/18/2002)				
Lisa & Joseph Glucksman 1615 Hollyhock Road Wellington, FL 33414							50,103.00
ACCOUNT NO.			Loan #2 (11/22/2006)				
Lisa & Joseph Glucksman 1615 Hollyhock Road Wellington, FL 33414							55,396.00
ACCOUNT NO.			Loan #3 (10/2/2007)	-		-	55,596.00
Lisa & Joseph Glucksman 1615 Hollyhock Road Wellington, FL 33414							236,340.00
ACCOUNT NO.			Health Care Supplies	-		\square	230,340.00
Lorwood H.C.S. Inc. 20535 Biscayne Blvd., Ste. 4239 Adventura, FL 33180							
			HUD OVER PAYMENT			x	2,721.44
ACCOUNT NO. Margo Peden NO KNOWN ADDRESS			HOD OVER FAIMENT			^	
							2,184.00
ACCOUNT NO.			HUD OVER PAYMENT			Х	
Marika Dolce NO KNOWN ADDRESS							
Sheet no5 of8 continuation sheets attached to				Sub			6,127.00
Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of t (Use only on last page of the completed Schedule F. Repor the Summary of Schedules, and if applicable, on the S Summary of Certain Liabilities and Relate	rt als Statis	Fota o o stica	al n al	\$ 354,836.44 \$

Debtor(s)

_____ Case No. _

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

		(continuation sheet)					
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	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.			HUD OVER PAYMENT			x		
Mary Hunter C/O Florida Housing Corporation 534 Datura Street West Palm Beach, FL 33401								12 594 00
			HUD OVER PAYMENT		-	х	-	13,584.00
ACCOUNT NO.						ſ	`	
Oscar McKinney NO KNOWN ADDRESS								7 607 00
ACCOUNT NO.			HUD OVER PAYMENT			Х		7,607.00
Patricia Sarle NO KNOWN ADDRESS								
ACCOUNT NO.			HUD OVER PAYMENT	_		x		8,248.00
Peter Tallman NO KNOWN ADDRESS	-					^		
ACCOUNT NO.			HUD OVER PAYMENT			x	, ,	2,621.00
Phillip Price C/O Florida Housing Corporation 534 Datrura Street West Palm Beach, FL 33401								7,478.48
ACCOUNT NO.			HUD OVER PAYMENT		-	x		7,470.40
Richard Phelps C/O Florida Housing Corporation 534 Datura Street West Palm Beach, FL 33401								
ACCOUNTING			HUD OVER PAYMENT	_		x		5,078.68
ACCOUNT NO. Richard Walsh C/O Florida Housing Corporation 534 Datura Street West Palm Beach, FL 33401								20,144.00
Sheet no. 6 of 8 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total o	Sut f this p			\$	64,761.16
			(Use only on last page of the completed Schedule F. Rep the Summary of Schedules, and if applicable, on the Summary of Certain Liabilities and Ref	port als e Stati	stic	on cal	\$	

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Debtor(s)

IN RE Florida Housing Corporation

Case No.

(If known)

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

		(Continuation Sheet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	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.			HUD OVER PAYMENT			х	
Robert Ostrander NO KNOWN ADDRESS							
							19,037.00
ACCOUNT NO. Rory Glucksman 966 38th Street West Palm Beach, FL 33407			Loan (12/18/2006)				
ACCOUNT NO.			HUD OVER PAYMENT			х	82,585.00
Rose Greynolds 1708 NE 4th Street Boynton Beach, FL 33436							9,082.00
ACCOUNT NO.			HUD OVER PAYMENT			Х	9,002.00
Samuel Melamed NO KNOWN ADDRESS							11,951.00
ACCOUNT NO.	$\left \right $		Loan (5/1998)				11,001.00
South Florida Affordable Housing Corporation 6521 NW 34th Ave. Ft. Lauderdale, FL 33309							1,001,718.00
ACCOUNT NO.	X		Line of credit				-,
South Florida Affordable Housing Corporation 6521 NW 34th Ave. Ft. Lauderdale, FL 33309							47,250.00
ACCOUNT NO. 5003	┢		Elevator Service	\square			-1,200.00
ThyssenKrup 7567 Central Industrial Drive Riviera Beach, FL 33404							
Sheet no. 7 of 8 continuation sheets attached to				Sub	tota		915.53
Sheet no. 7 of 8 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of th	is p	age	;)	\$ 1,172,538.53
			(Use only on last page of the completed Schedule F. Repor the Summary of Schedules, and if applicable, on the S	als		n	

ry of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.) \$ ne Summ

Case 08-25324-PGH
B6F (Official Form 6F) (12/07) - Cont.

Debtor(s)

IN RE Florida Housing Corporation	IN	RE	Florida	Housing	Corporation
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_____ Case No. _____

(If known)

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

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE				AMOUNT OF CLAIM
ACCOUNT NO.			HUD OVER PAYMENT			X	
Wesley Rivers NO KNOWN ADDRESS							12,949.00
ACCOUNT NO.							
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			(Total of th		age)	\$ 12,949.00
			(Use only on last page of the completed Schedule F. Report the Summary of Schedules, and if applicable, on the St Summary of Certain Liabilities and Relate	also atist	tica	n al	\$ 1,992,655.68

Case No.

IN RE Florida Housing Corporation

Debtor(s)

(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.
Amerimedz II 10641 SW 37th Place Davie, FL 33328	Amerimedz II Leases 3000 sq. ft. of space at 200 Rosemary Avenue, from the debtor. The lease commenced 11/2004 and was for a term of 5 years with a 5 year renewal
Ivory Joe Christen Personal Gurantor 10641 SW 37th Place Davie, FL 33328	
Frank Crum, Inc. 100 So. Missouri Ave. Clearwater, FL 33756	Employee leasing service; agreement dated 10/4/2002 Automatically Renewing 1 Year Terms
American Honda Finance P.O. Box 740565 Atlanta, GA 30374-0565	Lease on 2005 Honda Ridgeline (expires 1/2009) Joe Glucksman - Co-Lessee
Joe Glucksman Co-Lessee C/O Florida Housing Corp 534 Datura Street West Palm Beach, FL 33401	
GMAC P.O. Box 9001948 Louisville, KY 40290	Lease on 2006 Cadilac CTS (expires 2/2010)
Lexus Financial Services P.O. Box 17187 Baltimore, MD 21297-0511	Lease on 2006 Lexus RX 330 (expires 1/2009) Joe Glucksman - Co-Lessee
Joe Glucksman C/O Florida Housing Corp 534 Datura Street West Palm Beach, FL 33401	
Ecolab Post Office Box 905327 Charlotte, NC 28290-5327	Lease on dishwashing machine Model ES2000 1/16/2004 Automatically Renewing 1 year term
Atlantic Elevator C/O ThyssenKrupp 7567 Central Industrial Drive Riviera Beach, FL 33404	Service agreement dated 4/24/2003 Open ended agreement
Healthcare Services Group, Inc. 794 South Military Trail Deerfield Beach, FL 33442	Service agreement for contracted housekeeping services Dated 7/21/1997 open ended
Alarm Guard 3965 Investment Lane Riviera Beach, FL 33404	Service agreement for fire alarm monitoring services 11/20/2000 Automatically Renewing 1 year terms
Aramatic Refreshment Services Of Southeastern FL, Inc. 595 S.W. 13th Terrace, Suite C Pompano, FL 33069	Service agreement for soda vending machines 7/1/2003 Automatically renewing 1 year terms
Tyco Fire & Security Simplex Grinell 1440 W. Indiantown Rd., Suite 250	Service Agreement on Life Safety Equipment 1/23/2007 Automatically renewing 1 year terms

Document 1 Case 08-25324-PGH **B6H (Official Form 6H) (12/07)**

IN RE Florida Housing Corporation

Case No. _

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Debtor(s)

(If known)

SCHEDULE H - CODEBTORS

Filed 10/15/2008

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 the 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. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
Joseph Glucksman C/O Florida Housing Corp. 534 Dautra Street West Palm Beach, FL 33401	Angel Aids Center, Inc. C/O Law Offices Of Geoffrey D. Ittleman 2500 Hollywood Blvd., Ste. 309 Hollywood, FL 33020
	South Florida Affordable Housing Corporation 6521 NW 34th Ave. Ft. Lauderdale, FL 33309
Lisa & Joseph Glucksman 1615 Hollyhock Road Wellington, FL 33414	Wachovia Bank NA Commercial Loan Payment Center P.O. Box 740502 Atlanta, GA 32202

Case 08-25324-PGH Document 1 B6 Declaration (Official Form 6 - Declaration) (12/07)

Filed 10/15/2008 Page 30 of 71

IN	RE	Florida	Housing	Cor	poration
TT A		i ionau	nouoing	001	poration

Debtor(s)

Case No.

(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 _______ sheets, and that they are true and correct to the best of my knowledge, information, and belief.

(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(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required 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 the document.

Signature of Bankruptcy Petition Preparer

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 provision 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 CORPORATION OR PARTNERSHIP

I, the President

(the president or other officer or an authorized agent of the corporation or a

Date

member or an authorized agent of the partnership) of the **Florida Housing Corporation** (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 <u>27</u> 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: October 15, 2008

Signature: /s/ Joseph Glucksman

Joseph Glucksman

(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.

Address

Document 1 Filed 10/15/2008

Page 31 of 71

United States Bankruptcy Court Southern District of Florida

IN RE:

Florida Housing Corporation

Case No. _____ Chapter 11

STATEMENT OF FINANCIAL AFFAIRS

Debtor(s)

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 3,637,291.00 2006 3,134,157.00 2007 1,621,029.00 2008 YTD thru 7/31/08

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, 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.)

3. Payments to creditors

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

None 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 credit 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.)

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 \$5,475. 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.)

SEE ATTACHED LIST		0.00	0.00
NAME AND ADDRESS OF CREDITOR	DATE OF PAYMENTS/TRANSFERS	TRANSFERS	STILL OWING
		OR VALUE OF	AMOUNT
		AMOUNT PAID	

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.)

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 Angel Aids Center, Inc. v. Florida Housing Corporation and Joseph Glucksman Case No.: 502007CA021339XXXXMB AJ	NATURE OF PROCEEDING Civil Action	COURT OR AGENCY AND LOCATION Circuit Court, Palm Beach County, Florida	STATUS OR DISPOSITION Pending
Agency For Health Care Administration v. Florida Housing Corporation, d/b/a Palm Beach Assisted Living Facility AHCA No.: 2007011988	Administrative Action	Agency for Health Care Administration Attention: Agency Clerk 2727 Mahan Drive, Mail Stop #3 Tallahassee, Florida 32308	Pending
Agency For Health Care Administration v. Florida Housing Corp. d/b/a Palm Beach Assisted Living Facility AHCA No.: 2007013801	Administrative Action	Agency for Health Care Administration Attention: Agency Clerk 2727 Mahan Drive, Mail Stop #3 Tallahassee, Florida 32308	Pending
Henry Robinson, as Personal Representative of the Estate of Julia Robinson, deceased v. Florida Housing Corporation Case No.: 502006CA008169XXXXMB AE	Civil Action	Circuit Court, Palm Beach County, Florida	Settled October 2008 through Insurance Company

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.)

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.)

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 joint petition is not filed.)

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.)

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.)

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.)

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 bankruptcy law or preparation of a petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE Julianne R. Frank, Esq. Frank, White-Boyd, P.A. 11382 Prosperity Farms Rd., #230 Palm Beach Gardens, FL 33410 DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR **10/13/2008**

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

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY 40,000.00

10. Other transfers

None

petition is not filed.)		
NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR Joseph Adino C/O Florida Housing Corporation 534 Datura Street West Palm Beach, FL 33404 Resident of Palm Beach Assited Living Facility	DATE 4/30/08 5/31/08 6/30/08 7/31/08 8/30/08 9/30/08	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED \$58.92/Month total of \$353.52 For HUD Refund
Samuel Crabtree 2800 Broadway West Palm Beach, FL Former Palm Beach Assisted Living Facility Resident	5/28/2008	\$1439.00 HUD Refund
Mary Hunter C/O Florida Housing Corporation 534 Datura Street West Palm Beach, FL 33401 Resident of Palm Beach Assisted Living Facility	4/30/2008 5/31/2008 6/30/2008 7/31/2008 8/30/2008 9/30/08	\$522.47 per month totaling \$3,134.82 HUD Refund
Richard Phelps C/O Florida Housing Corporation 534 Datura Street West Palm Beach, FL 33401 Resident of Palm Beach Assisted Living Facility	4/30/08 5/31/08 6/30/08 7/31/08 8/30/08 9/30/08	\$195.33/Month totaling \$1,171.98 HUD Refund
Phillip Price C/O Florida Housing Corporation 534 Datrura Street West Palm Beach, FL 33401 Resident of Palm Beach Assisted Living Facility	4/30/08 5/31/08 6/30/08 7/31/08 8/30/08 9/30/08	\$287.63/Month totaling \$1,725.78 HUD Refund
Richard Walsh C/O Florida Housing Corporation 534 Datura Street West Palm Beach, FL 33401 Resident of Palm Beach Assisted Living Facility	4/30/08 5/31/08 6/30/08 7/31/08 8/30/08 9/30/08	\$774.79/Month Totaling \$4,648.74 HUD Refund

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.

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 or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

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.)

13. Setoffs

 \checkmark

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.)

14. Property held for another person

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

15. Prior address of debtor

None If debtor has moved within **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.

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.

17. Environmental Information

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.

None	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
\checkmark	the governmental unit to which the notice was sent and the date of the notice.

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.

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, partner in a partnership, sole proprietor, 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 **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 **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 **six years** immediately preceding the commencement of this case.

	LAST FOUR DIGITS			
	OF SOCIAL-			
	SECURITY OR OTHER			
	INDIVIDUAL			
	TAXPAYER-I.D. NO.		NATURE OF	BEGINNING AND
NAME	(ITIN)/COMPLETE EIN	ADDRESS	BUSINESS	ENDING DATES
Florida Housing Health Care	83-0411962	534 Datura St.	Health care	12/2/04-present
U		West Palm Beach, FL 33401	facility staffing	•
		,	pool	

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. \checkmark

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent 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 in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within the six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None a. List all bookkeepers and accountants who within the **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS Patricia Nobile 4135 Culpepper Ct. West Palm Beach, FL 33409

DATES SERVICES RENDERED 9/1998-present

Bookkeeper

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

Taxes & audits 2002-2004

Taxes 2005

DATES SERVICES RENDERED

NAME AND ADDRESS Kermit Waters, CPA 440 So. Federal Hwy. Deerfield Beach, FL 33441

Rampel & Rampel, CPA 223 Sunset Ave. #200 Palm Beach, FL 33480

Narda Butner, CPA 420 Clematis Street, 2nd Floor West Palm Beach, FL 33401 Audit 2005 & 2006 Taxes 2006 & 2007

Ongoing accounting services

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME AND ADDRESS Rampel & Rampel, CPA 223 Sunset Ave. #200 Palm Beach, FL 33480	Changes in computer systems & software have created small gaps in the 2007 data. CPA's adjusted for this in year end statements.	
None d. List all financial institutions, creditors, and oth within the two years immediately preceding the c		rade agencies, to whom a financial statement was issued tor.
NAME AND ADDRESS CapMark Finances, Inc. Att.:Thomas Wainscott, CPA, Sr Asset Mgr 700 No. Pearl Street, Ste. 200 Dallas, TX 75201	DATE ISSUED Issued all previous years and 1st quarter of 2008	
Palm Beach County Housing & Community Development, Attn.: Shairette Major 160 Australian Ave., #500 West Palm Beach, FL 33406	Last 4 years. Required due to Ioan from Commission on Affordable Housing.	
City Of West Palm Beach,Internal Auditor And Housing & Community Development 200 Second Street West Palm Beach, FL 33401	Last 5 years as a requirement of receiving HOPWA grant funds.	
US Dept. Of Housing & Urban Development Miami Field Office: Community Planning & Development, 909 SE First Ave., Rm 500 Miami, FL 33131-3042	Last 4 years as a requirement	ent of receiving grant funding.
20. Inventories		
None a. List the dates of the last two inventories taken of dollar amount and basis of each inventory.	of your property, the name of the per-	son who supervised the taking of each inventory, and the
DATE OF INVENTORY 12/3/2007	INVENTORY SUPERVISOR Florida Housing Corporation	DOLLAR AMOUNT OF INVENTORY (Specify cost, market, or other basis) Purpose of inventory: tax return depreciation Autos: \$103,387; Equipment: \$200,296; Furniture: \$209,842; Office Equipment: \$113,092 Total inventory: \$626,617 Source of inventory: 2007 Tax return
None b. List the name and address of the person having \checkmark	g possession of the records of each of	the two inventories reported in a., above.
21. Current Partners, Officers, Directors and Shareh	olders	
None a. If the debtor is a partnership, list the nature and \checkmark	l percentage of partnership interest of	each member of the partnership.
None b. If the debtor is a corporation, list all officers and or holds 5 percent or more of the voting or equity		ch stockholder who directly or indirectly owns, controls,
NAME AND ADDRESS Joseph Glucksman C/O Florida Housing Corp. 534 Datura Street West Palm Beach, FL 33401	TITLE President	NATURE AND PERCENTAGE OF STOCK OWNERSHIP No shares: 501(c)3 nonprofit
Mark Lerman C/O Florida Housing Corporation 534 Datura Street West Palm Beach, FL 33401	Secretay/Director	No shares: 501(c)3 nonprofit
Andrew Labarbera	Vice President/Treasurer/	No shares: 501(c)3 nonprofit

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534 Datura Stree	D Florida Housing Corporation Director			
Shelly Pitts C/O Florida Hous 534 Datura Stree West Palm Beac		Director	No share	s: 501(c)3 nonprofit
Josh Pertnoy C/O Florida Hous 534 Datura Stree West Palm Beac		Director	No share	s: 501(c)3 nonprofit
Dave Creps C/O Florida Hous 534 Datura Stree West Palm Beac		Director	No share	s: 501(c)3 nonprofit
22. Former partne	ers, officers, directors and shareh	olders		
-			ne partnership within one year	r immediately preceding the commencement
$\stackrel{\text{None}}{\checkmark} \text{ b. If the deb}$ preceding the	tor is a corporation, list all officers e commencement of this case.	s, or directors whose re	elationship with the corporation	on terminated within one year immediately
23. Withdrawals f	rom a partnership or distribution	ns by a corporation		
				insider, including compensation in any form, diately preceding the commencement of this
NAME & ADDRE RELATIONSHIP T Joseph Glucksm C/O Florida Hous 534 Dautra Stree West Palm Beac President	nan sing Corp. et	DATE AND PU OF WITHDRA Salary	WAL AND \$7,2	DUNT OF MONEY OR DESCRIPTION VALUE OF PROPERTY 49 per month Il for prior 12 months: \$86,987
24. Tax Consolida	tion Group			
	is a corporation, list the name and f which the debtor has been a membe			orporation of any consolidated group for tax og the commencement of the case.

25. Pension Funds.

None If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within six years immediately preceding the commencement of the case.

[If completed on behalf of a partnership or corporation]

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 to the best of my knowledge, information, and belief.

Date: October 15, 2008

Signature: /s/ Joseph Glucksman

Joseph Glucksman, President

Print Name and Title

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

<u>32</u> continuation pages 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.

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1010 · PALM BEACH ASSISTED LIVING 6325 · AUTO LEASE	1010 · PALM BEACH ASSISTED LIVING 2490 · GMAC Loan - Tahop	1010 - PALM BEACH ASSISTED LIVING 2150 - LOAN INTEREST	1010 · PALM BEACH ASSISTED LIVING 2150 · LOAN INTEREST	1010 - PALM BEACH ASSISTED LIVING 5300 - FOOD - PAPER PRODUCTS 5400 - FOOD - CHEMICALS 5240 - GFS 5240 - GFS	1010 - PALM BEACH ASSISTED LIVING 8605 - WORKERS COMP INCIDENT FEE	8102 - ADMINISTRATIVE SALARIES 8103 - BOOKGEEING 8103 - BOOKGEEING 8103 - BOOKGEEING 8105 - PROGRAM DIRECTOR 8053 - OSEWERS SALARIES 5101 - PROGRAM DIRECTOR 8053 - OSEWORKER SALARIES 5101 - PROGRAM DIRECTOR 8103 - DISHWASHER 6101 - MEDICATION TECH. 6102 - FERSONAL CARE SUPV. 6103 - RESIDENTIAL CNA 4105 - MAINTENANCE MGR. 4705 - LAUNDRY PAYROLL. 4105 - MAINTENANCE MGR. 4705 - LAUNDRY PAYROLL.	1010 · PALM BEACH ASSISTED LIVING	1010 - PALM BEACH ASSISTED LIVING 8615 - LIABILITY INSURANCE	1010 - PALM BEACH ASSISTED LIVING 8325 - AUTO LEASE	1010 - PALM BEACH ASSISTED LIVING 2420 - Nissian Odessy	Account	
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	COMMERCIAL LOAN PYMT CTR		P. O. BOX 742572		P. O. BOX 9076			DEPARTMENT AT 40472		POBOX 17187				P.O. BOX 30000	P.O. BOX 30000						Name Streett	July 15	FLORIDA
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	30374-0502		45274-2572		50368-9076			31192-0472		21297-0511				33630-3000	33630-3000						Name Zip		
					4984738585			930041468		04-077272986		024-9086-91862 CTS		6391497495~1	6391497495-1	024-9086-91862 CTS					Name Account #		
8230 - BANK CHARGE	1010 · PALM BEACH ASSISTED LIVING	8200 - OFFICE SUPPLIES	1010 · PALM BEACH ASSISTED LIVING	6310 - AUTO FUEL 6310 - AUTO FUEL	1010 · PALM BEACH ASSISTED LIVING	5310 - COOKWARE 5240 - GFS 5200 - FOOD - PAPER PRODUCTS 5200 - GFS 5240 - GFS 5240 - GFS	5300 · FOOD - PAPER PRODUCTS 5400 · FOOD - CHEMICALS 5240 - GFS	1010 · PALM BEACH ASSISTED LIVING	6325 - AUTO LEASE	1010 · PALM BEACH ASSISTED LIVING	6325 · AUTO LEASE	1010 - PALM BEACH ASSISTED LIVING	4540 - WATER/SEWER	1010 · PALM BEACH ASSISTED LIVING	1010 - PALM BEACH ASSISTED LIVING 4540 - WATER/SEWER	1010 • PALM BEACH ASSISTED LIVING 2430 • GMAC Loan - Tahoe	4510 - FPL	1010 · PALM BEACH ASSISTED LIVING	4510 - FPL	1010 · PALM BEACH ASSISTED LIVING	Account		
-153,98 -153,98	U	-97.57 -97.57		-893.05 -446.12 -1,339.17	-	-81.06 -156.72 -1.635.45 -53.00 -590.54 -31.60 -4.246.92	-155.99 -22.52 -1,520.04	-	-564,90 -564,90		-325.00		-62.66 -62.66		-4,961.08	-587.53	-90.17 -90.17		-9,486,52 -9,486,52		Paid Amount		

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MPERIAL PREMIUM FINANCE, INC.		GORDON FOOD SERVICE	LEXUS FINANCIAL SERVICES		AMERISTAFF/CRUM	AMERISTAFF/CRUM		AMERICAN EXPRESS	:
BOX 9045		DEPARTMENT AT 40472	POBOX 17187		100 SOUTH MISSOURI AVE	100 SOUTH MISSOURI AVE		P. O. BOX 360001	FLORIDA PB July 12
NEW YORK		ATLANTA	BALTIMORE		CLEARWATER	CLEARWATER			FLORIDA HOUSING CORPORATION PBALF Check Detail July 15 through October 15, 2008
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		930041468	04-077272986					Name Account #	
1010 - PALM BEACH ASSISTED LIVING 8615 - LIABILITY INSURANCE	5400 - FOOD - RHEMICALS 5240 - GFS 5300 - FOOD - RHER PRODUCTS 5400 - FOOD - CHEMICALS 5241 - GFS 5241 - GFS 5300 - FOCD - PAPER PRODUCTS 5240 - GFS 5240 - GFS	1010 - PALM BEACH ASSISTED LWING 5300 - FOOD - PAPER PRODUCTS 5400 - FOOD - CHEMICALS 5240 - ORS 5300 - FOOD - PAPER PRODUCTS	1010 - PALM BEACH ASSISTED LIVING 6325 - AUTO LEASE	8520 - EMPLOYEE INSURANCE 1102 - ADMIN ASSISTANTS 3100 - ACTIVITES SPECIALIST 405 - ARCOGRAM DIRECTOR 4105 - MANUES SALARES 6101 - ADMINISTRATIVE SALARES 6102 - PROGRAM MOR 6102 - PRESONAL CARE SUPV 6101 - MEDICATION TECH. 5101 - COCK 5101 - CISCH 5103 - DISHWASHER 5103 - DISHWASHER 5	1010 · PALM BEACH ASSISTED LIVING	1010 · PALM BEACH ASSISTED LIVING 8605 · WORKERS COMP INCIDENT FEE	8200 - OFFICE SUPPLIES	Account	
-4,778.79 -4,778.79	-8,71 -861,70 -141,96 -1,608,10 -1,608,10 -174,12 -174,12 -1,670,53 -6,792,58	-184,97 -25,65 -1,673,85 -21,86	-538.00	223.52 -2.378.32 -2.378.57 -2.387.53 -3.387.56 -3.387.56 -3.387.56 -4.15.582.56 -1.5.582.56 -1.5.582.56 -1.592.56 -1		-350.00	-110.00	Paid Amount	

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6325 · AUTO LEASE	1010 · PALM BEACH ASSISTED LIVING	2430 · GMAC Loan - Tahoe	1010 · PALM BEACH ASSISTED LIVING	6310 · AUTO FUEL	1010 · PALM BEACH ASSISTED LIVING	4510 - FPL	1010 · PALM BEACH ASSISTED LIVING	4510 - FPL	1010 · PALM BEACH ASSISTED LIVING	4540 - WATER/SEWER	1010 · PALM BEACH ASSISTED LIVING	1010 - PALM BEACH ASSISTED LIVING 4540 - WATER/SEWER		2150 LOAN INTEREST	1010 · PALM BEACH ASSISTED LIVING	2150 · LOAN INTEREST	1010 - PALM BEACH ASSISTED LIVING	4105 - MEDICATION TECH 6102 - PERSONAL CARE SUPV 6103 - RESIDENTIAL CNA 5101 - COOK 5101 - COOK 5102 - SERVER 5104 - FOOD PREP 5102 - SERVER 4105 - MANNDRY PAYROLL 4705 - LAUNDRY PAYROLL	3100 - ACTIVITES SPECIALIST 4105 - MAINTENANCE MGR. 8101 - ADMINISTRATIVE SALARIES 8103 - BOCKKEEPING 8051 - PROGRAM DIRECTOR 6015 - DRIVERS SALARIES 8052 - PROGRAM MGR. 8052 - ANUM ASSICTANTS	1010 · PALM BEACH ASSISTED LIVING	Account			
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			1999 MARTIN LUTHER KING BLVD.		1999 MARTIN LUTHER KING BLVD.				426 CLAREMORE DR.												426 CLAREMORE DR.			Name Street1	July 15	Bd	FLORIDA
			RIVIERA BEACH		RIVIERA BEACH				W.P.B.												W.P.B.			Name City	July 15 through October 15, 2008	PBALF Check Detail	FLORIDA HOUSING CORPORATION
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	-69-80 -69-	5210 - DAILY FOOD									TOTAL	
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HEALTHCARE SERVICES GROUP, INC.	WHITE PALMS FIRE EQUIPMENT	SASSER'S GLASS WORKS	SOUTH EAST CUTLERY SERVICE	SEWELL	SASSER'S GLASS WORKS	JOHNSTONE SUPPLY	DU-ALL SEWER AND DRAIN	DU-ALL SEWER AND DRAIN	BEST COM	номе рерот	DAILY FOOD BANK	Name	
CORP. OFFICE	4400 - K CHARLOTTE STREET	504 DATURA STREET	407 PROSPECT ROAD	P.O. BOX 1010	504 DATURA STREET	5620 NW 12TH AVE. Ste 101	509 SOUTH "H" STREET	509 SOUTH "H" STREET	1560 LATHAM ROAD STE # 3		426 CLAREMORE DR.	Name Street1	FLORIDA H PBA July 15 t
BENSALEM	LAKE WORTH	WEST PALM BEACH	OAKLAND PARK	WEST PALM BEACH	WEST PALM BEACH	FT. LAUERDALE	LAKE WORTH	LAKE WORTH	WEST PALM BEACH		W.P.B.	Name City	FLORIDA HOUSING CORPORATION PBALF Check Detail July 15 through October 15, 2008
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		CARTRIDGE WORLD		PETTY CASH		GARDENS PEST CONTROL		Anita Moreno		JAMES PRESCOTT		SYSCO		SYSCO		HOME DEPOT		OFFICE DEPOT		MAROONE CADILLAC		GRAINGER		HOME DEPOT	Name			
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	8200 - OFFICE SUPPLIES	1010 · PALM BEACH ASSISTED LIVING	8439 - TRAINING	1010 · PALM BEACH ASSISTED LIVING	4420 - EXTERMINATOR	1010 · PALM BEACH ASSISTED LIVING	9105 · REFUND	1010 · PALM BEACH ASSISTED LIVING	9105 · REFUND	1010 · PALM BEACH ASSISTED LIVING	5400 · FOOD - CHEMICALS 5250 · SYSCO	1010 · PALM BEACH ASSISTED LIVING	5300 - FOOD - PAPER PRODUCTS 5400 - FOOD - CHEMICALS 5250 - SYSCO	1010 - PALM BEACH ASSISTED LIVING	2210 · REPAIR & MAINTENANCE	1010 • PALM BEACH ASSISTED LIVING	8200 - OFFICE SUPPLIES	1010 · PALM BEACH ASSISTED LIVING	6330 - AUTO SERVICE	1010 · PALM BEACH ASSISTED LIVING	2210 · REPAIR & MAINTENANCE	1010 · PALM BEACH ASSISTED LIVING	2210 - REPAIR & MAINTENANCE	1010 · PALM BEACH ASSISTED LIVING	Account			
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BLUE VKOSS/BLUE SMELU OF FLO		F. Sanchez		JOHNSTONE SUPPLY		HOME DEPOT		GEORGE W. PERLEY		PETTY CASH		OFFICE DEPOT		SYSCO		DAILY FOOD BANK		HOME DEPOT		DAILY FOOD BANK		HOME DEPOT		HOME DEPOT	Name			
P.O. BOX 2488				5620 NW 12TH AVE. Ste 101				CONSULTANT PHARMACIST						1999 MARTIN LUTHER KING BLVD.		426 CLAREMORE DR.				426 CLAREMORE DR.					Name Street1	July 15 t	PB/	FLORIDA H
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1010 - PALM BEACH ASSISTED LIVING 8620 - EMPLOYEE INSURANCE		1010 · PALM BEACH ASSISTED LIVING		1010 - PALM BEACH ASSISTED LIVING	2210 - REPAIR & MAINTENANCE	1010 · PALM BEACH ASSISTED LIVING	6112 - CONTRACTED LABOR	1010 · PALM BEACH ASSISTED LIVING	6310 - AUTO FUEL	1010 · PALM BEACH ASSISTED LIVING	8200 - OFFICE SUPPLIES	1010 · PALM BEACH ASSISTED LIVING	5300 · FOOD - PAPER PRODUCTS 5250 · SYSCO	1010 · PALM BEACH ASSISTED LIVING	5210 - DAILY FOOD	1010 · PALM BEACH ASSISTED LIVING	2210 · REPAIR & MAINTENANCE	1010 - PALM BEACH ASSISTED LIVING	5210 - DAILY FOOD	1010 · PALM BEACH ASSISTED LIVING	2210 · REPAIR & MAINTENANCE	1010 · PALM BEACH ASSISTED LIVING	2210 REPAIR & MAINTENANCE	1010 · PALM BEACH ASSISTED LIVING	Account			
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		2650 N. MILITARY TRAIL SUITE 150		1035 S STATE ROAD , SUITE 311		1440 WEST INDIANTOWN ROAD		P.O. BOX 1080		504 DATURA STREET	5620 NW 12TH AVE. Ste 101		P.O. BOX 905327		P. O.BOX 277290		CORP. OFFICE		1999 MARTIN LUTHER KING BLVD.			Name Street1	July 15 1	PB/	FLORIDA H
		BOCA RATON		WELLINGTON		JUPITER		WEST PALM BEACH		WEST PALM BEACH	FT. LAUERDALE		CHARLOTTE		ATLANTA		BENSALEM		RIVIERA BEACH			Name City	July 15 through October 15, 2008	PBALF Check Detail	FLORIDA HOUSING CORPORATION
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1010 - PALM BEACH ASSISTED LIVING 8440 - LICENSE/FEES/PERMITS	6420 - LEGAL & PROF.	1010 · PALM BEACH ASSISTED LIVING	6320 - AUTO INSURANCE	1010 · PALM BEACH ASSISTED LIVING	4410 - FIRE ALARM/SPRINKLERS	1010 · PALM BEACH ASSISTED LIVING	4210 - SUPPLIES/REPAIRS	1010 · PALM BEACH ASSISTED LIVING	2210 · REPAIR & MAINTENANCE	1010 · PALM BEACH ASSISTED LIVING	1010 - PALM BEACH ASSISTED LIVING 2210 - REPAIR & MAINTENANCE	8240 - EQUIPMENT LEASE 8240 - EQUIPMENT LEASE	1010 · PALM BEACH ASSISTED LIVING	8210 - POSTAL 8210 - POSTAL	1010 · PALM BEACH ASSISTED LIVING	4605 · HEALTHCARE SERVICES 4605 · HEALTHCARE SERVICES	1010 · PALM BEACH ASSISTED LIVING	5250 · SYSCO	1010 · PALM BEACH ASSISTED LIVING	8430 - TRAINING 5110 - FOOD SERVICE STIPEND	1010 · PALM BEACH ASSISTED LIVING	Account			
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	8p		BEST COM		AT&T		ALARM GUARD		ADP, INC.		F. Sanchez		HEALTHCARE SERVICES GROUP, INC. CORP. OFFICE		VERITEXT		PETTY CASH		WACHOVIA		SYSCO		NARDA A. BUTNER, CPA	Name			
	P. O. BOX 9076		1560 LATHAM ROAD STE # 3		PHOENIX, AZ 85062-8522				7007 NORTH WEST 77TH AVE.				2, CORP. OFFICE						COMMERCIAL LOAN PYMT CTR		1999 MARTIN LUTHER KING BLVD.		420 Clematis Street, 2nd Floor	Name Streetf	July 16	PB	FLORIDA
	DES MOINES		WEST PALM BEACH		561		RIVERA BEACH		MIAMI				BENSALEM						ATLANTA		RIVIERA BEACH		West Palm Beach	Name City	July 15 through October 15, 2008	PBALF Check Detail	FLORIDA HOUSING CORPORATION
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	COMCAST		CITY OF WPB CRA		WEST PALM BEACH FIRE RESCUE		SPRINT		SOUTH FLORIDA'S CHOICE		JOHNSTONE SUPPLY		HEALTHCARE SERVICES GROUP, INC.		FLORIDA PUBLIC UTILITIES		ECOLAB		DOLINSKY CONSULTING		DIETETIC CONSULTING GROUP		DHL EXPRESS	Name			
	P.O.BOX 105184		ATTENTION: ACCOUNTS RECIEVABLE		P.O.BOX 3366		PO BOX 4191		1401 GREEN ROAD		5620 NW 12TH AVE, Ste 101		. CORP. OFFICE		P.O.BOX 3395		P.O. BOX 905327				528 OAK COVE RD		P. O.BOX 277290	Name Street1	July 15 t	FLORIDA H	
	ATLANTA		WEST PALM BEACH		WEST PALM BEACH		CAROL STREAM		POMPANO BEACH		FT. LAUERDALE		BENSALEM		WEST PALM BEACH		CHARLOTTE				TITUSVILLE		ATLANTA	Name City	July 15 through October 15, 2008	FLORIDA HOUSING CORPORATION	
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	30348-5184		33402		33402		60197-6220		33064		33309		19020		33402-3395		28290-5327				32780		30384	Name Zip			
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4400 -CABLE 4400 -CABLE	1010 · PALM BEACH ASSISTED LIVING	2400 · CRA Loan for Rosemary	1010 · PALM BEACH ASSISTED LIVING	8440 · LICENSE/FEES/PERMITS	1010 · PALM BEACH ASSISTED LIVING	4530 - TELEPHONE	1010 · PALM BEACH ASSISTED LIVING	5230 - OTHER	1010 · PALM BEACH ASSISTED LIVING	2210 · REPAIR & MAINTENANCE	1010 - PALM BEACH ASSISTED LIVING	4605 · HEALTHCARE SERVICES	1010 · PALM BEACH ASSISTED LIVING	4520 - GAS	1010 - PALM BEACH ASSISTED LIVING	8240 - EQUIPMENT LEASE 8240 - EQUIPMENT LEASE	1010 - PALM BEACH ASSISTED LIVING	8250 - OFC EQPT REPAIRS/COMP	1010 · PALM BEACH ASSISTED LIVING	5600 · DIETICIAN	1010 · PALM BEACH ASSISTED LIVING	8210 - POSTAL	1010 • PALM BEACH ASSISTED LIVING	Account			
-14, 77 -14, 77 -29, 54		-2,646,67 -2,646,67		-250.00 -250.00		-1,206.44 -1,206.44		-143.00		-35,83		-5,384.48 -5,384.48		-1,471.57 -1,471.57		-144.24 -55.71 -199.95		-2,697.50 -2,697.50		-165.00 -165.00		-54,94		Paid Amount			

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6310 · AUTO FUEL	1010 · PALM BEACH ASSISTED LIVING	4211 - EQUIPMENT MAINTENANCE	1010 · PALM BEACH ASSISTED LIVING	2240 - CONTRACTED LABOR	1010 · PALM BEACH ASSISTED LIVING	2231-L · Overpayment due to clients	1010 · PALM BEACH ASSISTED LIVING	2231-L · Overpayment due to clients	1010 · PALM BEACH ASSISTED LIVING	2231-L · Overpayment due to clients	1010 · PALM BEACH ASSISTED LIVING	2231-L · Overpayment due to clients	1010 · PALM BEACH ASSISTED LIVING	2231-L - Overpayment due to clients	1010 · PALM BEACH ASSISTED LIVING	4420 - EXTERMINATOR	1010 · PALM BEACH ASSISTED LIVING	8445 - MEMBERSHIP DUES	1010 · PALM BEACH ASSISTED LIVING	9105 · REFUND	1010 - PALM BEACH ASSISTED LIVING	9105 · REFUND	1010 · PALM BEACH ASSISTED LIVING	Account			
-65.54		-221.00		-1,932,00 -1,932,00		-58.92 -58.92		-195.33 -195.33		-287.63 -287.63		-522,47 -522,47		-774,79 -774,79		-200.00 -200.00		-140.00		-438.97		-278.00		Paid Amount			

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·	F. Sanchez		PETTY CASH		HEALTHCARE SERVICES GROUP, INC. CORP. OFFICE		WACHOVIA	·	THYSSENKRUPP		TAX COLLECTOR, PALM BEACHCOU		STATE FARM INSURANCE		SYSCO		HEALTHCARE SERVICES GROUP, INC.		BLUE CROSS/BLUE SHIELD OF FLO		NARDA A. BUTNER, CPA		PETTY CASH	Name			
					CORP. OFFICE		COMMERCIAL LOAN PYMT CTR		PO BOX 933010				1035 S STATE ROAD , SUITE 311		1999 MARTIN LUTHER KING BLVD.		CORP. OFFICE		P.O. BOX 2458		420 Clematis Street, 2nd Floor			Name Street1	July 15	PB	
					BENSALEM		ATLANTA		ATLANTA				WELLINGTON		RIVIERA BEACH		BENSALEM		JACKSONVILLE		West Palm Beach			Name City	July 15 through October 15, 2008	PBALF Check Detail	FI ORIDA HOUSING CORPORATION
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									64257-5003				1096-1719-19						53282001		·			Name Account #			
2240 - CONTRACTED LABOR	1010 - PALM BEACH ASSISTED LIVING	8110 - ADMIN/STIPEND 5110 - FOOD SERVICE STIPEND 4110 - PLANT M & R STIPPEND	1010 · PALM BEACH ASSISTED LIVING	4605 · HEALTHCARE SERVICES	1010 - PALM BEACH ASSISTED LIVING	2450 - Wachovia Loan (Elevator) 2460 - Wachovia Loan	1010 · PALM BEACH ASSISTED LIVING	4430 - ELEVATOR	1010 · PALM BEACH ASSISTED LIVING		1010 - PALM BEACH ASSISTED LIVING	6320 · AUTO INSURANCE	1010 · PALM BEACH ASSISTED LIVING	5300 · FOOD - PAPER PRODUCTS 5250 · SYSCO	1010 · PALM BEACH ASSISTED LIVING	4605 · HEALTHCARE SERVICES	1010 · PALM BEACH ASSISTED LIVING	8620 · EMPLOYEE INSURANCE	1010 · PALM BEACH ASSISTED LIVING	8270 · ACCOUNTING FEES	1010 PALM BEACH ASSISTED LIVING	8110 - ADMINUSTIPEND 5110 - FOOD SERVICE STIPEND 4110 - PLANT M & R STIPPEND 3100 - ACTIVITIES SPECIALIST	1010 · PALM BEACH ASSISTED LIVING	Account			
-556,61 -556,61	-	-2,505,50 -608,78 -576,00 -3,688,28		-6,256,32 -6,256.32		-1,586.00 -1,087,10 -2,673,10		-915.53 -915.53		0.00	·	-1,123.01 -1,123.01		-138,13 -1,889,50 -1,827,63		-8,000,00		-3,817.67 -3,817.67		-1,125.00		-2,422.00 -568.78 -568.00 -40.00 -3,616.78		Paid Amount			

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4400 -CABLE 4400 -CABLE	1010 · PALM BEACH ASSISTED LIVING	1010 - PALM BEACH ASSISTED LIVING 8445 - MEMBERSHIP DUES		4530 - TELEPHONE	1010 - PALM BEACH ASSISTED LIVING	8310 - ADVERTISING	1010 · PALM BEACH ASSISTED LIVING	8440 · LICENSE/FEES/PERMITS	1010 · PALM BEACH ASSISTED LIVING	8125 - PAYROLL PROC. FEE 8125 - PAYROLL PROC. FEE	1010 · PALM BEACH ASSISTED LIVING	9105 · REFUND	1010 · PALM BEACH ASSISTED LIVING	2231-L · Overpayment due to clients	1010 · PALM BEACH ASSISTED LIVING	2231-L · Overpayment due to clients	1010 · PALM BEACH ASSISTED LIVING	2231-L · Overpayment due to clients	1010 · PALM BEACH ASSISTED LIVING	2231-L · Overpayment due to clients	1010 - PALM BEACH ASSISTED LIVING	2231-L · Overpayment due to clients	1010 · PALM BEACH ASSISTED LIVING	Account			
-14.77 -14.77 -29.54		-45.00	-65.29	-65.29		-245.50		-150.00		-374.42 -374.42 -748.84		-360,96		-58.92 -58.92		-195.33		-287,63 -287,63		-522.47		-774.79 -774.79		Paid Amount			

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	F. Sanchez		PETTY CASH		PETTY CASH		ELAINE PECHWASSER		WEINTRAUB & WEINTRAUB		SOUTH FLORIDA'S CHOICE		PALM BEACH COUNTY HEALTH DEP		LORWOOD H.C.S. INC.		FLORIDA PUBLIC UTILITIES		ECOLAB		DHLEXPRESS	Name			
									2650 N. MILITARY TRAIL SUITE 150		1401 GREEN ROAD		909 EVERNIA STREET, P.O. BOX 29		20533 BISCAYNE BLVD.		P.O.BOX 3395		P.O. BOX 905327		P. O.BOX 277290	Name Street1	July 15 t	PBA	
									BOCA RATON		POMPANO BEACH		WEST PALM BEACH		ADVENTURA		WEST PALM BEACH		CHARLOTTE		ATLANTA	Name City	July 15 through October 15, 2008	PBALF Check Detail	FLORIDA HOUSING CORPORATION
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2240 - CONTRACTED LABOR	1010 - PALM BEACH ASSISTED LIVING		1010 • PALM BEACH ASSISTED LIVING	8110 - ADMIN/STIPEND 4110 - PLANT M & R STIPPEND 3110 - ACTIVITE/STIPEND 5110 - FOOD SERVICE STIPEND 4110 - PLANT M & R STIPPEND	1010 · PALM BEACH ASSISTED LIVING	2240 · CONTRACTED LABOR	1010 · PALM BEACH ASSISTED LIVING	6420 · LEGAL & PROF.	1010 · PALM BEACH ASSISTED LIVING	5230 - OTHER 5230 - OTHER 5230 - OTHER 5230 - OTHER	1010 · PALM BEACH ASSISTED LIVING	8440 · LICENSE/FEES/PERMITS	1010 - PALM BEACH ASSISTED LIVING	6200 - HEALTH SUPPLIES 6200 - HEALTH SUPPLIES 4610 - HOUSKEEPING SUPPLIES 6200 - HEALTH SUPPLIES	1010 · PALM BEACH ASSISTED LIVING	4520 - GAS	1010 · PALM BEACH ASSISTED LIVING	8240 - EQUIPMENT LEASE	1010 · PALM BEACH ASSISTED LIVING	8210 - POSTAL 8210 - POSTAL	1010 PALM BEACH ASSISTED LIVING	Account			
-493.16 -493,16		0.00		-2,462.00 -220,00 -800,00 -500,35 -3,698,36		-1,932.00		-1,536,94 -1,536,94		-38.85 -24.00 -197.75 -260.60		-110.00 -110.00		-1,295.10 -1,146.16 -1,347.19 -1,447.29 -5,235.74		-1,096,49 -1,096,49		-70.70		-68.80 -72.54 -141.34		Paid Amount			

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LORWOOD H.C.S. INC.	HEALTHCARE SERVICES GROUP, INC. DHL EXPRESS	WACHOVIA STATE FARM INSURANCE	CLAYTON EXTERMINATING SYSCO	BLUE CROSS/BLUE SHIELD OF FLO CITY OF WPB BANK OF AMERICA 406	Name
20533 BISCAYNE BLVD.	CORP. OFFICE P. O.BOX 277230	COMMERCIAL LOAN PYMT CTR 1035 S STATE ROAD , SUITE 311	1999 MARTIN LUTHER KING BLVD.	P.O. BOX 2458 P.O. BOX 3366 P.O. BOX 538673	FLORIDA F PBA July 151 Name Street1
ADVENTURA	BENSALEM ATLANTA	ATLANTA WELLINGTON	RIVIERA BEACH	JACKSONVILLE WEST PALM BEACH ATLANTA	FLORIDA HOUSING CORPORATION PBALF Check Detail July 15 through October 15, 2008
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1010 - PALM BEACH ASSISTED LIVING 4610 - HOUSEKEEPING SUPPLIES 6200 - HEALTH SUPPLIES 4610 - HOUSEKEEPING SUPPLIES 6100 - PERSONAL CARE 4610 - HOUSEKEEPING SUPPLIES	1010 · PALM BEACH ASSISTED LIVING 4605 · HEALTHCARE SERVICES 1010 · PALM BEACH ASSISTED LIVING 8210 - POSTAL 8210 - POSTAL	1010 - PALM BEACH ASSISTED LIVING 2400 - Washovia Lean 2150 - LOAN INTEREST 2450 - Washovia Lean (Elevator) 2150 - LOAN INTEREST 1010 - PALM BEACH ASSISTED LIVING 6320 - AUTO INSURANCE	1010 - PALM BEACH ASSISTED LIVING 4420 - EXTERMINATOR 1010 - PALM BEACH ASSISTED LIVING 5300 - FOOD - PAPER PRODUCTS 5400 - GFS 5240 - GFS 1010 - PALM BEACH ASSISTED LIVING	1010 · PALM BEACH ASSISTED LIVING 6520 · EMPLOYEE INSURANCE 1010 · PALM BEACH ASSISTED LIVING 8440 · LICENSE/FEES/PERMITS 1010 · PALM BEACH ASSISTED LIVING 2150 · LOAN INTEREST	Account
-1,115.01 -132.37 -1305.39 -155.59 -1,153.44 -3,862.17	-8,000,00 -8,000,00 -92,79 -92,79 -95,73 -189,52	0.00 -560.21 -1.005.79 -402.40 -2.673.10 -2.677.33	-200.00 -200.00 -200.00 -211.23 -50.17 -1,490.42 -1,751.82	-4,294,61 -4,294,61 -25,00 -25,00	Paid Amount

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2231-L - Overpayment due to clients	1010 · PALM BEACH ASSISTED LIVING	2231-L Overpayment due to clients	1010 - PALM BEACH ASSISTED LIVING	2231-L · Overpayment due to clients	1010 • PALM BEACH ASSISTED LIVING	2231-L · Overpayment due to clients	1010 - PALM BEACH ASSISTED LIVING	8210 - POSTAL	1010 · PALM BEACH ASSISTED LIVING	8200 - OFFICE SUPPLIES	1010 · PALM BEACH ASSISTED LIVING	6310 · AUTO FUEL	1010 · PALM BEACH ASSISTED LIVING	4211 · EQUIPMENT MAINTENANCE	1010 · PALM BEACH ASSISTED LIVING	6330 - AUTO SERVICE 4530 - TELEPHONE	1010 · PALM BEACH ASSISTED LIVING	4520 - GAS 8305 - TRANSPORT	1010 · PALM BEACH ASSISTED LIVING	2240 - CONTRACTED LABOR	1010 · PALM BEACH ASSISTED LIVING	8110 - ADMIN/STIPEND 4110 - PLANT M& R STIPPEND 3110 - ACTIVITESSTIPEND 5110 - PCOD SERVICE STIPEND 4110 - PLANT M& R STIPPEND	1010 · PALM BEACH ASSISTED LIVING	Account			
-195.33 -195.33		-287.63 -287.63		-522,47 -522,47		-774.79 -774.79		-126.00 -125.00		-17.00 -17.00		-50,00		-1,245.00		-8.25 -25.04 -33.29		-20.00 -17.00 -37.00		-485.95		-2,451.00 -220.00 -686.78 -3,733.78		Paid Amount			

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	ADP, INC.		MARDA A. BUTNER, CPA		THYSSENKRUPP		S#MPLEX GRINNELL		SEWELL		JOHN F. GILROY		ECOLAB		COMCAST		AT&T		FLORIDA PUBLIC UTILITIES		HEALTHCARE SERVICES GROUP, INC.		SYSCO		56	Name		
	7007 NORTH WEST 77TH AVE.		420 Clematis Street, 2nd Floor		PO BOX 933010		1440 WEST INDIANTOWN ROAD		P.O. BOX 1080		1695 METROPOLITAN CIRCLE SUITE 2		P.O. BOX 905327		P.O.BOX 105184		PHOENIX, AZ 85062-8522		P.O.BOX 3395		CORP. OFFICE		1999 MARTIN LUTHER KING BLVD.			Name Street1	July 15	FLORIDA
	MIAMI		West Palm Beach		ATLANTA		JUPITER		WEST PALM BEACH		TALLAHASSEE		CHARLOTTE		ATLANTA		561		WEST PALM BEACH		BENSALEM		RIVIERA BEACH			Name City	July 15 through October 15, 2008	FLORIDA HOUSING CORPORATION
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	33166-2898		33401		31193-3010		33458		33402		32308		28290-5327		30348-5184		659-9330		33402-3395		19020		33404			Name Zip		
					64257-5003				644382				019657555		01641318337-01-3											Name Account #		
8125 - PAYROLL PROC. FEE	1010 · PALM BEACH ASSISTED LIVING	8270 · ACCOUNTING FEES	1010 · PALM BEACH ASSISTED LIVING	4430 - ELEVATOR	1010 · PALM BEACH ASSISTED LIVING	4410 - FIRE ALARM/SPRINKLERS	1010 · PALM BEACH ASSISTED LIVING		1010 · PALM BEACH ASSISTED LIVING	6420 · LEGAL & PROF.	1010 · PALM BEACH ASSISTED LIVING	8240 - EQUIPMENT LEASE	1010 - PALM BEACH ASSISTED LIVING	4400 - CABLE 4400 - CABLE	1010 · PALM BEACH ASSISTED LIVING	4530 - TELEPHONE	1010 · PALM BEACH ASSISTED LIVING	4520 - GAS	1010 · PALM BEACH ASSISTED LIVING	4605 · HEALTHCARE SERVICES	1010 · PALM BEACH ASSISTED LIVING	5250 · SYSCO	1010 · PALM BEACH ASSISTED LIVING	2231-L · Overpayment due to clients	1010 - PALM BEACH ASSISTED LIVING	Account		
-374.42 -374.42		-2,250.00		-915.53		-180.50		0.00		-481.25		-144.24 -144.24		-14.77 -14.77 -29.54		-775.44 -775.44		-991,85		-2,256.32 -2,256.32		-1,376,56 -1,376,56		-58.92 -58.92		Paid Amount		

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	SASSER'S GLASS WORKS		AMERICAN HOSPITALS PATIENT GUI		SIR SPEEDY		LORWOOD H.C.S. INC.		ALARM GUARD		DANIEL S. MANDEL		LIZ BRUMLEY FOR MICHAEL BRUML		FLORIDA DEPT OF AGRICULTURE &		ELAINE PECHWASSER		WEINTRAUB & WEINTRAUB		JOHN HANCOCK LIFE INSURANCE		SOUTH FLORIDA'S CHOICE	Name			
	504 DATURA STREET		P.O.BOX 131		430 CLEMATIS STREET		20533 BISCAYNE BLVD.	·			7251 W. PALMETTO PARK ROAD SUI		223 FORTUNA DRIVE						2650 N. MILITARY TRAIL SUITE 150		LIFE CASH DESK, C6		1401 GREEN ROAD	Name Street1	July 15 t	/Bd	FLORIDA H
	WEST PALM BEACH		SCHENECTADY		WEST PALM BEACH		. ADVENTURA		RIVERA BEACH		BOCA RATON		PALM BEACH GARDENS						BOCA RATON		BOSTON		POMPANO BEACH	Name City	July 15 through October 15, 2008	PBALF Check Detail	FLORIDA HOUSING CORPORATION
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	33401		12301		33401		33180		33404		33433		33410						33431		02117		33064	Name Zip			
																							100296	Name Account #			
2210 - RÉPAIR & MAINTENANCE	1010 - PALM BEACH ASSISTED LIVING	8310 - ADVERTISING	1010 · PALM BEACH ASSISTED LIVING	8200 - OFFICE SUPPLIES	1010 - PALM BEACH ASSISTED LIVING	6100 -PERSONAL CARE 6100 -PERSONAL CARE 4610 - HOUSEKEEPING SUPPLIES	1010 · PALM BEACH ASSISTED LIVING	4410 · FIRE ALARM/SPRINKLERS	1010 · PALM BEACH ASSISTED LIVING	6420 · LEGAL & PROF.	1010 · PALM BEACH ASSISTED LIVING	9105 · REFUND	1010 · PALM BEACH ASSISTED LIVING	8440 · LICENSE/FEES/PERMITS	1010 - PALM BEACH ASSISTED LIVING	5420 · LEGAL, & PROF,	1010 · PALM BEACH ASSISTED LIVING	6420 · LEGAL & PROF.	1010 - PALM BEACH ASSISTED LIVING	8621 - LIFE INSURANCE	1010 · PALM BEACH ASSISTED LIVING	5230 - OTHER	1010 · PALM BEACH ASSISTED LIVING	Account			
-16.18 -16.18		-491.00		-52.00		-1,158.19 -205.04 -1,229.30 -2,592.53		-176,49 -176,49		-2,760.00		-515.58 -515.58		-125.00 -125.00		-1,932.00		-1,100.00		-2,973.03 -2,973.03		-160.75 -160.75		Paid Amount			

Case 08-25324-PGH Document 1 Filed 10/15/2008

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Case 08-25324-PGH	Document 1	Filed	10/	/15/20	08	Pa	age	66	of 7	1				
		BIII TOTAL	Bill Pmt -Check	Bill Total,	BIII TOTAL	Bill Pmt -Check	Bill TOTAL	Bill Pmt -Check	Bill Total	Bill Pmt -Check	Type		10/13/08	1:41 PM
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		10/8/2008	10/13/2008	10/4/2008	10/1/2008	10/7/2008	9/29/2008	10/7/2008	8/31/2008 9/30/2008	10/7/2008	Date			
			WEINTRAUB & WEINTRAUB	BLUE OROSS/BLUE SHIELD OF FLO		HEALTHCARE SERVICES GROUP, INC.		SOUTH EAST CUTLERY SERVICE		SEWELL	Name			
			2650 N. MILITARY TRAIL SUITE 150	P.O. BOX 2458		CORP. OFFICE		407 PROSPECT ROAD		P.O. BOX 1080	Name Street1	July 15	PB,	FLORIDA I
			BOCA RATON	JACKSONVILLE		BENSALEM		OAKLAND PARK		WEST PALM BEACH	Name City	July 15 through October 15, 2008	PBALF Check Detail	FLORIDA HOUSING CORPORATION
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			33431	32231-0047		19020		33334		33402	Name Zip			
				53282001						644382	Name Account #			
		6420 · LEGAL & PROF.	1010 · PALM BEACH ASSISTED LIVING	1010 · PALM BEACH ASSISTED LIVING 8620 · EMPLOYEE INSURANCE	4605 · HEALTHCARE SERVICES	1010 · PALM BEACH ASSISTED LIVING	5310 · COOKWARE	1010 · PALM BEACH ASSISTED LIVING	4210 - SUPPLIES/REPAIRS 4210 - SUPPLIES/REPAIRS	1010 · PALM BEACH ASSISTED LIVING	Account			
		-1,375.00 -1,375.00		-4,294,61 -4,294,61	-4,000.00		-32.50		-18.85 -16.31 -35.16		Paid Amount			

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	AMERICAN HONDA FINANCE		CAPITAL ONE		AMERISTAFF/CRUM		WACHOVIA		AT&T		AMERISTAFF/CRUM		AMERICAN EXPRESS		AMERICAN HONDA FINANCE		AMERISTAFF/CRUM	Name	
	P.O. BOX 740565		P.O. BOX 85184		100 SOUTH MISSOURI		COMMERCIAL LOAN P		PHOENIX, AZ 85062-8522		100 SOUTH MISSOURI		P. O. BOX 360001		P.O. BOX 740565		100 SOUTH MISSOURI	Name Street1	FLORIDA HOUSING CORPORATION FLORIDA HOUSING CORP. July 15 through October 15, 2008
	ATLANTA		RICHMOND		CLEARWATER		ATLANTA		561		CLEARWATER		FT. LAUDERDALE		ATLANTA		CLEARWATER	Name City	LORIDA HOUSING CORPORATIO FLORIDA HOUSING CORP. July 15 through October 15, 2008
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																		Name Account #	
6325 - AUTO LEASE	1020 - Corporate Account #2248	4730 - LINENS 6310 · AUTO FUEL 6330 · MEALS & ENTERTAINMENT 4710 - LAUNDRY SUPPLIES 2210 · REPAIR & MAINTENANCE 6430 · AUTO INSURANCE 6320 · AUTO INSURANCE 6320 · AUTO SERVICE 8210 - POSTAL 2210 · REPAIR & MAINTENANCE	1020 · Corporate Account #2248	8104 - FHC CORPORATE SALARIES	1020 · Corporate Account #2248	8230 - BANK CHARGE	1020 · Corporate Account #2248	4530 - TELEPHONE	1020 · Corporate Account #2248	8104 - FHC CORPORATE SALARIES	1020 - Corporate Account #2248	8330 · MEALS & ENTERTAINMENT	1020 · Corporate Account #2248	6325 · AUTO LEASE	1020 · Corporate Account #2248	8104 - FHC CORPORATE SALARIES	1020 · Corporate Account #2248	Account	
-699.00		-956.14 -603.06 -1,218.76 -21.43 -21.43 -21.43 -21.43 -21.43 -21.52 -180.60 -180.60 -180.63 -180.63 -180.63 -180.63 -180.64 -3.52 -4,004.37		-6,335.55 -6,335.55		-26.89 -26.89		-45,96		-6,335,55 -6,335,55		-1,000.00		00`669- 00`669-		-6,332.66 -6,332.66		Paid Amount	

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	AUTO PHONE	192831817	AUTO PHONE		AUTO	67331958 06 RID	AUTO		AUTO		AUTO	561-329-3628	AUTO		AUTO		AUTO	7	AUTO	Num	
8/31/2008	9/25/2008	7/1/2008	7/15/2008		10/13/2008	9/6/2008	9/26/2008		9/26/2008		9/12/2008	9/11/2008	9/11/2008		9/10/2008		9/10/2008	7/31/2008	8/28/2008	Date	·
	SPRINT		SPRINT		AMERISTAFF/CRUM		AMERICAN HONDA FINANCE		AMERISTAFF/CRUM		AMERISTAFF/CRUM		AT&T		WACHOVIA		AMERICAN EXPRESS		SPRINT	Name	
	PO BOX 4191		PO BOX 4191		100 SOUTH MISSOURI		P.O. BOX 740565		100 SOUTH MISSOURI		100 SOUTH MISSOURI		PHOENIX, AZ 85062-8522		COMMERCIAL LOAN P		P. O. BOX 360001		PO BOX 4191	Name Street1	FLORIDA HOUSING CORPORATION FLORIDA HOUSING CORP. July 15 through October 15, 2008
	CAROL STREAM		CAROL STREAM		CLEARWATER		ATLANTA		CLEARWATER		CLEARWATER		561		ATLANTA		FT, LAUDERDALE		CAROL STREAM	Name City	LORIDA HOUSING CORPORATIO FLORIDA HOUSING CORP. July 15 through October 15, 2008
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	266357411		266357411																266357411	Name Account #	
4530 - TELEPHONE	1020 · Corporate Account #2248	4530 - TELEPHONE	1020 · Corporate Account #2248	8104 - FHC CORPORATE SALARIES	1020 · Corporate Account #2248	6325 · AUTO LEASE	1020 · Corporate Account #2248	8104 - FHC CORPORATE SALARIES	1020 · Corporate Account #2248	8104 - FHC CORPORATE SALARIES	1020 - Corporate Account #2248	4530 - TELEPHONE	1020 · Corporate Account #2248	8230 - BANK CHARGE	1020 - Corporate Account #2248	8330 · MEALS & ENTERTAINMENT 8430 - TRAINING	1020 · Corporate Account #2248	4530 - TELEPHONE	1020 Corporate Account #2248	Account	
-240.51 -240.51		-233.44 -233.44		-6,332.58 -6,332.58		00.669- 00.669-		-6,332.60 -6,332.60		-6,332.60 -6,332.60		-45.96		-28.55 -28.55		-1,000,00 -585.21 -1,585.21		-302,89		Paid Amount	

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	AT&T		FRANK WHITE- BOYD P.A.	·	SPECIALTY SUPPLIES		SPECIALTY SUPPLIES		SPECIALTY SUPPLIES		PETTY CASH		FRANK WHITE- BOYD P.A.			MANDEL, WEISMAN, KIRSCHN		JOHN F. GILROY		PATRICIA NOBILE		SPECIAL TY SUPPLIES	Name	
	PHOENIX, AZ 85062-8522		11382 PROSPERITY FA										11382 PROSPERITY FA			SUITE 300		1695 METROPOLITAN					Name Street1	FLORIDA HOUSING CORPORATION FLORIDA HOUSING CORP. July 15 through October 15, 2008
	561		PALM BEACH GAR										PALM BEACH GAR			BOCA RATON		TALLAHASSEE					Name City	LORIDA HOUSING CORPORATIO FLORIDA HOUSING CORP. July 15 through October 15, 2008
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																							Name Account #	
4530 - TELEPHONE	1020 · Corporate Account #2248	6420 · LEGAL & PROF.	1020 · Corporate Account #2248	2209 · CONSULTATION BLDG RENOVAT	1020 · Corporate Account #2248	2209 · CONSULTATION BLDG RENOVAT	1020 · Corporate Account #2248		1020 · Corporate Account #2248		1020 · Corporate Account #2248	6420 · LEGAL & PROF.	1020 · Corporate Account #2248		6420 · LEGAL & PROF.	1020 · Corporate Account #2248	6420 · LEGAL & PROF.	1020 · Corporate Account #2248	8104 - FHC CORPORATE SALARIES	1020 · Corporate Account #2248	2209 · CONSULTATION BLDG RENOVAT	1020 · Corporate Account #2248	Account	
-46,19 -46,19		-1,330.00		-3,750,00		-900.00		0.00		0,00		-3,000.00		-1,600.00	-1.600.00		-275.00		-1,875.00 -1,875.00		-2,500.00		Paid Amount	

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Case 08-25324-PGH	Document 1	Filed 10/	15/2008	Page	70 of 71		
		TOTAL	TOTAL Check	Bill Pmt -Check Bill TOTAL Check	Bill Pmt -Check Bill .TOTAL	Туре	1:52 PM
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			FRANK WHITE- BOYD P A		SPRINT	Name	
				105 SO. NARCISSUS AVE	PO BOX 4191	Name Street1	FLORIDA HOUSING CORPORATION FLORIDA HOUSING CORP. July 15 through October 15, 2008
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• •					266357411	Name Account #	
	· · · · ·	1929 - Gorporate Account #2248 6420 - LEGAL & PROF.	2209 - CONSULTATION BLDG RENOVAT	1020 · Corporate Account #2248 2209 · CONSULTATION BLDG RENOVAT	1020 · Corporate Account #2248 4530 - TELEPHONE	Account	
		-40,000.00	-4,750.00 -4,750.00	-750.00 -750.00	-131,19	Paid Amount	

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United States Bankruptcy Court Southern District of Florida

IN RE:

Case No. _____

Florida Housing Corporation

Chapter 11

LIST OF EQUITY SECURITY HOLDERS

Debtor(s)

Registered name and last known address of security holder	Shares (or Percentage)	Security Class (or kind of interest)
NONE:	0	
Debtor Is A Not For Profit		
501(C)(3) Entity		