

B1 (Official Form 1)(1/08)

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

**Voluntary Petition**

Name of Debtor (if individual, enter Last, First, Middle): <b>Adeleke, Mary M.</b>	Name of Joint Debtor (Spouse) (Last, First, Middle):
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):	All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all) <b>xxx-xx-1518</b>	Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all)
Street Address of Debtor (No. and Street, City, and State): <b>7332 S.W. 123rd Place Miami, FL</b>	Street Address of Joint Debtor (No. and Street, City, and State):
ZIP Code <b>33183</b>	ZIP Code
County of Residence or of the Principal Place of Business: <b>Miami-Dade</b>	County of Residence or of the Principal Place of Business:
Mailing Address of Debtor (if different from street address):	Mailing Address of Joint Debtor (if different from street address):
ZIP Code	ZIP Code

Location of Principal Assets of Business Debtor (if different from street address above):

<b>Type of Debtor</b> (Form of Organization) (Check one box)  <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)	<b>Nature of Business</b> (Check one box)  <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other  <b>Tax-Exempt Entity</b> (Check box, if applicable) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).	<b>Chapter of Bankruptcy Code Under Which the Petition is Filed</b> (Check one box)  <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input checked="" type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13  <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding  <b>Nature of Debts</b> (Check one box)  <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> Debts are primarily business debts.
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<b>Filing Fee</b> (Check one box)  <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.	<b>Chapter 11 Debtors</b> Check one box: <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input checked="" type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,190,000.  Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
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**Statistical/Administrative Information**

Debtor estimates that funds will be available for distribution to unsecured creditors.  
 Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.

**Estimated Number of Creditors**

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1-49	50-99	100-199	200-999	1,000-5,000	5,001-10,000	10,001-25,000	25,001-50,000	50,001-100,000	OVER 100,000

**Estimated Assets**

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion

**Estimated Liabilities**

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion

THIS SPACE IS FOR COURT USE ONLY

<b>Voluntary Petition</b> (This page must be completed and filed in every case)		Name of Debtor(s): <b>Adeleke, Mary M.</b>	
<b>All Prior Bankruptcy Cases Filed Within Last 8 Years</b> (If more than two, attach additional sheet)			
Location Where Filed: <b>- None -</b>		Case Number:	Date Filed:
Location Where Filed:		Case Number:	Date Filed:
<b>Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor</b> (If more than one, attach additional sheet)			
Name of Debtor: <b>- None -</b>		Case Number:	Date Filed:
District:		Relationship:	Judge:
<b>Exhibit A</b>  (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)  <input type="checkbox"/> Exhibit A is attached and made a part of this petition.		<b>Exhibit B</b>  (To be completed if debtor is an individual whose debts are primarily consumer debts.) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b).  <b>X /s/ Lynn H. Gelman, Esq.</b> <u>April 7, 2009</u> Signature of Attorney for Debtor(s) (Date) <b>Lynn H. Gelman, Esq. 0245011</b>	
<b>Exhibit C</b> Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? <input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No.			
<b>Exhibit D</b> (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) <input checked="" type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: <input type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.			
<b>Information Regarding the Debtor - Venue</b> (Check any applicable box) <input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. <input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.			
<b>Certification by a Debtor Who Resides as a Tenant of Residential Property</b> (Check all applicable boxes) <input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)  _____ (Name of landlord that obtained judgment)   _____ (Address of landlord)  <input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and <input type="checkbox"/> Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. <input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).			

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

Name of Debtor(s):  
**Adeleke, Mary M.**

**Signature(s) of Debtor(s) (Individual/Joint)**

I declare under penalty of perjury that the information provided in this petition is true and correct.  
 [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.  
 [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

/s/ Mary M. Adeleke  
 Signature of Debtor **Mary M. Adeleke**

\_\_\_\_\_  
 Signature of Joint Debtor

\_\_\_\_\_  
 Telephone Number (If not represented by attorney)

April 7, 2009  
 Date

**Signatures**

**Signature of a Foreign Representative**

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.

Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

\_\_\_\_\_  
 Signature of Foreign Representative

\_\_\_\_\_  
 Printed Name of Foreign Representative

\_\_\_\_\_  
 Date

**Signature of Attorney\***

/s/ Lynn H. Gelman, Esq.  
 Signature of Attorney for Debtor(s)

Lynn H. Gelman, Esq. 0245011  
 Printed Name of Attorney for Debtor(s)

Lynn H. Gelman, P.A.  
 Firm Name

**1450 Madruga Avenue**  
**Suite 408**  
**Coral Gables, FL 33146**

\_\_\_\_\_  
 Address

(305) 668-6681 Fax: (305) 668-6682  
 Telephone Number

April 7, 2009  
 Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

**Signature of Non-Attorney Bankruptcy Petition Preparer**

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

\_\_\_\_\_  
 Printed Name and title, if any, of Bankruptcy Petition Preparer

\_\_\_\_\_  
 Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

\_\_\_\_\_  
 Address

\_\_\_\_\_  
 Date

**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.

\_\_\_\_\_  
 Signature of Authorized Individual

\_\_\_\_\_  
 Printed Name of Authorized Individual

\_\_\_\_\_  
 Title of Authorized Individual

\_\_\_\_\_  
 Date

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

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

\_\_\_\_\_  
 \_\_\_\_\_

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

*A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.*

B 1D(Official Form 1, Exhibit D) (12/08)

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

In re Mary M. Adeleke

Debtor(s)

Case No. \_\_\_\_\_

Chapter 11

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

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

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

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

2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*

3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]* \_\_\_\_\_

**If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.**

B 1D(Official Form 1, Exhibit D) (12/08) - Cont.

4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

Active military duty in a military combat zone.

5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

**I certify under penalty of perjury that the information provided above is true and correct.**

Signature of Debtor:                   /s/ Mary M. Adeleke                    
Mary M. Adeleke

Date:           April 7, 2009

B4 (Official Form 4) (12/07)

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

In re Mary M. Adeleke

Debtor(s)

Case No. \_\_\_\_\_

Chapter 11

**LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS**

Following is the list of the debtor's creditors holding the 20 largest unsecured claims. The list is prepared in accordance with Fed. R. Bankr. P. 1007(d) for filing in this chapter 11 [or chapter 9] case. The list does not include (1) persons who come within the definition of "insider" set forth in 11 U.S.C. § 101, or (2) secured creditors unless the value of the collateral is such that the unsecured deficiency places the creditor among the holders of the 20 largest unsecured claims. If a minor child is one of the creditors holding the 20 largest unsecured claims, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

(1)	(2)	(3)	(4)	(5)
<i>Name of creditor and complete mailing address including zip code</i>	<i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	<i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	<i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff</i>	<i>Amount of claim [if secured, also state value of security]</i>
Associated Credit An 975 Eyster Blvd Rockledge, FL 32955-3527	Associated Credit An 975 Eyster Blvd Rockledge, FL 32955-3527	Collection Waterford Landi		278.00
Badcock 4423 Cherry Rd West Palm Beach, FL 33409-6085	Badcock 4423 Cherry Rd West Palm Beach, FL 33409-6085	ChargeAccount		1,520.00
Bk Of Amer 475 Crosspoint Pkw Getzville, NY 14068	Bk Of Amer 475 Crosspoint Pkw Getzville, NY 14068	ConventionalRealE stateMortgage		154,040.00 (0.00 secured)
Bk Of Amer 475 Crosspoint Pkw Getzville, NY 14068	Bk Of Amer 475 Crosspoint Pkw Getzville, NY 14068	ConventionalRealE stateMortgage		69,271.00 (0.00 secured)
Bk Of Amer 4060 Ogletown/Stan Newark, DE 19713	Bk Of Amer 4060 Ogletown/Stan Newark, DE 19713	CreditCard		30,240.00
Cap One Pob 30281 Salt Lake City, UT 84130	Cap One Pob 30281 Salt Lake City, UT 84130	CreditCard		319.00
Capital 1 Fa Attn- Credit Burea Plano, TX 75093	Capital 1 Fa Attn- Credit Burea Plano, TX 75093	Automobile		22,342.00
Collection Bur Orlando 1595 S Semoran Blvd Ste Winter Park, FL 32792	Collection Bur Orlando 1595 S Semoran Blvd Ste Winter Park, FL 32792	CollectionAttorney Medical Center Radio		113.00
Crd Prt Asso One Galleria Tower Dallas, TX 75240	Crd Prt Asso One Galleria Tower Dallas, TX 75240	Collection Comcast		458.00
Doctors Business Bur 202 N Federal Hwy Lake Worth, FL 33460-3496	Doctors Business Bur 202 N Federal Hwy Lake Worth, FL 33460-3496	Collection Emergency Phys		562.00
Ffcc/Alchro 5821 Hollywood Blv Hollywood, FL 33021	Ffcc/Alchro 5821 Hollywood Blv Hollywood, FL 33021	Collection Med1 02 So Fla Emerg		302.00

B4 (Official Form 4) (12/07) - Cont.

In re Mary M. Adeleke

Case No. \_\_\_\_\_

Debtor(s)

**LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS**

(Continuation Sheet)

(1)	(2)	(3)	(4)	(5)
<i>Name of creditor and complete mailing address including zip code</i>	<i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	<i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	<i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff</i>	<i>Amount of claim [if secured, also state value of security]</i>
Indi Cr 2008 Okeechobee Blvd West Palm Beach, FL 33409-4111	Indi Cr 2008 Okeechobee Blvd West Palm Beach, FL 33409-4111	Automobile		6,845.00
Macys/Fdsb 9111 Duke Blvd Mason, OH 45040	Macys/Fdsb 9111 Duke Blvd Mason, OH 45040	ChargeAccount		537.00
Midland Cred 8875 Aero Dr San Diego, CA 92123	Midland Cred 8875 Aero Dr San Diego, CA 92123	Collection Bank Of America		40,967.00
Nco Fin/22 Pob 41448 Philadelphia, PA 19101	Nco Fin/22 Pob 41448 Philadelphia, PA 19101	Collection Nco Asgne Of At T		425.00
Nco- Medclr Pob 41448 Philadelphia, PA 19101	Nco- Medclr Pob 41448 Philadelphia, PA 19101	Collection Med1 02 Emergency Ph		587.00
Toyota Mtr Po Box 647 Alpharetta, GA 30009	Toyota Mtr Po Box 647 Alpharetta, GA 30009	AutoLease		49,308.00
West Asset 2703 N Highway 75 Sherman, TX 75090	West Asset 2703 N Highway 75 Sherman, TX 75090	Collection Med1 02 Kendall Medi		2,614.00
Whrm 2221 Newmarket Par Marietta, GA 30067	Whrm 2221 Newmarket Par Marietta, GA 30067	Collection Med1 02 Health Centr		3,070.00
Whrm 2221 Newmarket Par Marietta, GA 30067	Whrm 2221 Newmarket Par Marietta, GA 30067	Collection Med1 02 Health Centr		656.00

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

I, **Mary M. Adeleke**, 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 April 7, 2009Signature /s/ Mary M. Adeleke**Mary M. Adeleke**

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.

Associated Credit An  
975 Eyster Blvd  
Rockledge, FL 32955-3527

Badcock  
4423 Cherry Rd  
West Palm Beach, FL 33409-6085

Badcock  
11247 Sw 152nd St  
Cutler Ridge, FL 33177

Bankunited  
6075 Sunset Drive  
Hialeah, FL 33014

Bk Of Amer  
475 Crosspoint Pkw  
Getzville, NY 14068

Bk Of Amer  
4060 Ogletown/Stan  
Newark, DE 19713

Bk Of Amer  
4161 Piedmont Pkwy  
Greensboro, NC 27410

Bk Of Amer  
4161 Piedmont Parkway  
Greensboro, NC 27410

Bnkunted Fsb  
4350 Sheridan St  
Hollywood, FL 33021

Cap One  
Pob 30281  
Salt Lake City, UT 84130

Capital 1 Fa  
Attn- Credit Burea  
Plano, TX 75093



Citi  
Pob 6241  
Sioux Falls, SD 57117

Citi  
P.O. Box 6500  
Sioux Falls, SD 57117-6500

Collection Bur Orlando  
1595 S Semoran Blvd Ste  
Winter Park, FL 32792

Crd Prt Asso  
One Galleria Tower  
Dallas, TX 75240

Dcfs Usa Llc  
36455 Corporate Dr  
Farmington Hills, MI 48331

Doctors Business Bur  
202 N Federal Hwy  
Lake Worth, FL 33460-3496

Ffcc/Alchro  
5821 Hollywood Blv  
Hollywood, FL 33021

Frd Motor Cr  
Pob 542000  
Omaha, NE 68154

Fst Premier  
3820 N Louise Ave  
Sioux Falls, SD 57104

Fst Usa Bk B  
Po Box 8650  
Wilmington, DE 19899

Gemb/Walmart  
Po Box 981400  
El Paso, TX 79998

Hsbc Bank  
Po Box 5253  
Carol Stream, IL 60197

Indi Cr  
2008 Okeechobee Blvd  
West Palm Beach, FL 33409-4111

Internal Revenue Service  
P.O. Box 21126  
Philadelphia, PA 19114-0326

Macys/Fdsb  
9111 Duke Blvd  
Mason, OH 45040

Mercedes-Ben  
P.O. Box 685  
Roanoke, TX 76262

Midland Cred  
8875 Aero Dr  
San Diego, CA 92123

Nco Fin/22  
Pob 41448  
Philadelphia, PA 19101

Nco Fin/27  
Po Box 7216  
Philadelphia, PA 19101

Nco- Medclr  
Pob 41448  
Philadelphia, PA 19101

Nextcard Inc  
P.O. Box 923148  
Norcross, GA 30010

Rjm Acq Llc  
575 Underhill Blvd  
Syosset, NY 11791

Sears/Cbsd  
Po Box 6189  
Sioux Falls, SD 57117

Toyota Mtr  
Po Box 647  
Alpharetta, GA 30009

West Asset  
2703 N Highway 75  
Sherman, TX 75090

Whrm  
2221 Newmarket Par  
Marietta, GA 30067