

B1 (Official Form 1)(4/10)

United States Bankruptcy Court Southern District of Florida		Voluntary Petition
Name of Debtor (if individual, enter Last, First, Middle): Modular Medical Systems, Inc.		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) 65-0765470		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): 2701 Industrial Ave 3 Fort Pierce, FL <div style="text-align: right;">ZIP Code 34946</div>		Street Address of Joint Debtor (No. and Street, City, and State): <div style="text-align: right;">ZIP Code</div>
County of Residence or of the Principal Place of Business: Saint Lucie		County of Residence or of the Principal Place of Business:
Mailing Address of Debtor (if different from street address): <div style="text-align: right;">ZIP Code</div>		Mailing Address of Joint Debtor (if different from street address): <div style="text-align: right;">ZIP Code</div>
Location of Principal Assets of Business Debtor (if different from street address above):		
Type of Debtor (Form of Organization) (Check one box) <input type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input checked="" type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)	Nature of Business (Check one box) <input 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 checked="" type="checkbox"/> Other <hr/> Tax-Exempt Entity (Check box, if applicable) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).	Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box) <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input checked="" type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding Nature of Debts (Check one box) <input type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input checked="" type="checkbox"/> Debts are primarily business debts.
Filing Fee (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.		Chapter 11 Debtors Check one box: <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input checked="" type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,343,300 (amount subject to adjustment on 4/01/13 and every three years thereafter). Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
Statistical/Administrative Information <input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.		THIS SPACE IS FOR COURT USE ONLY
Estimated Number of Creditors <input checked="" type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> OVER 100,000		
Estimated Assets <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input checked="" type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion		
Estimated Liabilities <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input checked="" type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion		

<p>Voluntary Petition</p> <p><i>(This page must be completed and filed in every case)</i></p>		<p>Name of Debtor(s): Modular Medical Systems, Inc.</p>	
<p>All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet)</p>			
<p>Location Where Filed: - None -</p>		<p>Case Number:</p>	<p>Date Filed:</p>
<p>Location Where Filed:</p>		<p>Case Number:</p>	<p>Date Filed:</p>
<p>Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet)</p>			
<p>Name of Debtor: - None -</p>		<p>Case Number:</p>	<p>Date Filed:</p>
<p>District:</p>		<p>Relationship:</p>	<p>Judge:</p>
<p style="text-align: center;">Exhibit A</p> <p>(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)</p> <p><input type="checkbox"/> Exhibit A is attached and made a part of this petition.</p>		<p style="text-align: center;">Exhibit B</p> <p>(To be completed if debtor is an individual whose debts are primarily consumer debts.)</p> <p>I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b).</p> <p>X _____ Signature of Attorney for Debtor(s) (Date)</p>	
<p>Exhibit C</p>			
<p>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?</p> <p><input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition.</p> <p><input checked="" type="checkbox"/> No.</p>			
<p>Exhibit D</p>			
<p>(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)</p> <p><input type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition.</p> <p>If this is a joint petition:</p> <p><input type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.</p>			
<p>Information Regarding the Debtor - Venue</p> <p>(Check any applicable box)</p>			
<p><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.</p> <p><input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.</p> <p><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.</p>			
<p>Certification by a Debtor Who Resides as a Tenant of Residential Property</p> <p>(Check all applicable boxes)</p>			
<p><input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)</p> <p style="margin-left: 40px;">_____</p> <p style="margin-left: 40px;">(Name of landlord that obtained judgment)</p> <p style="margin-left: 40px;">_____</p> <p style="margin-left: 40px;">(Address of landlord)</p> <p><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</p> <p><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.</p> <p><input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).</p>			

<p>Voluntary Petition</p> <p><i>(This page must be completed and filed in every case)</i></p>	<p>Name of Debtor(s): Modular Medical Systems, Inc.</p>
Signatures	
<p style="text-align: center;">Signature(s) of Debtor(s) (Individual/Joint)</p> <p>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).</p> <p>I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>X _____ Signature of Debtor</p> <p>X _____ Signature of Joint Debtor</p> <p>_____ Telephone Number (If not represented by attorney)</p> <p>_____ Date</p>	<p style="text-align: center;">Signature of a Foreign Representative</p> <p>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.</p> <p>(Check only one box.)</p> <p><input type="checkbox"/> 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.</p> <p><input type="checkbox"/> 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.</p> <p>X _____ Signature of Foreign Representative</p> <p>_____ Printed Name of Foreign Representative</p> <p>_____ Date</p>
<p style="text-align: center;">Signature of Attorney*</p> <p>X /s/ Brad Culverhouse, Attorney At Law, Chartered Florid Signature of Attorney for Debtor(s)</p> <p>Brad Culverhouse, Attorney At Law, Chartered Florid Printed Name of Attorney for Debtor(s)</p> <p>BRAD CULVERHOUSE, ATTORNEY AT LAW, CHARTERED Firm Name</p> <p>Street Address: 320 South Indian River Drive, Ste. 100 Fort Pierce, FL 34950</p> <p>_____ Address</p> <p style="text-align: right;">Email: BradCulverhouseLaw@gmail.com</p> <p>772-465-7572 Telephone Number</p> <p>October 21, 2010 Date</p> <p><small>*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.</small></p>	<p style="text-align: center;">Signature of Non-Attorney Bankruptcy Petition Preparer</p> <p>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.</p> <p>_____ Printed Name and title, if any, of Bankruptcy Petition Preparer</p> <p>_____ 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.)</p> <p>_____ Address</p> <p>X _____ Date</p> <p>Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.</p> <p>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:</p> <p>_____ If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.</p> <p><i>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.</i></p>
<p style="text-align: center;">Signature of Debtor (Corporation/Partnership)</p> <p>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.</p> <p>The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>X /s/ George Barson Signature of Authorized Individual</p> <p>George Barson Printed Name of Authorized Individual</p> <p>President Title of Authorized Individual</p> <p>October 21, 2010 Date</p>	

B4 (Official Form 4) (12/07)

United States Bankruptcy Court
Southern District of Florida

In re Modular Medical Systems, Inc.

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>
AB Consulting Engineers 1320 N Semoran Blvd Ste 102 Orlando, FL 32807	AB Consulting Engineers 1320 N Semoran Blvd Ste 102 Orlando, FL 32807	Services		2,000.00
Action Brass 406 Farmers Market Rd Fort Pierce, FL 34982	Action Brass 406 Farmers Market Rd Fort Pierce, FL 34982	Finishes raw material ;Critical Vendor		3,040.47
Airgas South Inc PO Box 532609 Atlanta, GA 30353-2609	Airgas South Inc PO Box 532609 Atlanta, GA 30353-2609	Supplies		3,325.82
Aluma-Tech 715 1 Whitney Ave Lake Worth, FL 33462	Aluma-Tech 715 1 Whitney Ave Lake Worth, FL 33462	Sub contractor		8,576.00
BEIC PO Box 32034 Lakeland, FL 33802	BEIC PO Box 32034 Lakeland, FL 33802	Supplies		3,310.80
Capital One PO Box 71083 Charlotte, NC 28272-1083	Capital One PO Box 71083 Charlotte, NC 28272-1083	Supplies		15,000.00
Cleartel PO Box 6432 Carol Stream, IL 60197-6432	Cleartel PO Box 6432 Carol Stream, IL 60197-6432	Services		517.42
Continental Steel PO Box 030040 Fort Lauderdale, FL 33303	Continental Steel PO Box 030040 Fort Lauderdale, FL 33303	Supplies		461.15
Discover Card PO Box 6103 Carol Stream, IL 60197-6103	Discover Card PO Box 6103 Carol Stream, IL 60197-6103	Services		15,000.00
Eastern Metal Supply Inc 3600 23rd Ave S Lake Worth, FL 33461	Eastern Metal Supply Inc 3600 23rd Ave S Lake Worth, FL 33461	Aluminum supplier;Critical Vendor		6,608.25
Engineering First Class 1516 E Hillcres Street Ste 304 Orlando, FL 32803	Engineering First Class 1516 E Hillcres Street Ste 304 Orlando, FL 32803	Services		538.50
Fastenal PO Box 1286 Winona, MN 55987-1286	Fastenal PO Box 1286 Winona, MN 55987-1286	Supplies		704.50

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

In re **Modular Medical Systems, Inc.**

Case No. _____

Debtor(s) _____

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

(Continuation Sheet)

(1) <i>Name of creditor and complete mailing address including zip code</i>	(2) <i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	(3) <i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	(4) <i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff</i>	(5) <i>Amount of claim [if secured, also state value of security]</i>
PayPal PO Box 960080 Orlando, FL 32896-0080	PayPal PO Box 960080 Orlando, FL 32896-0080	Supplies	Disputed	800.00
Premium Assignment Po Box 3100 Tallahassee, FL 32315-3100	Premium Assignment Po Box 3100 Tallahassee, FL 32315-3100	Supplies		2,596.36
Ricoh PO box 73210 Chicago, IL 60673-0001	Ricoh PO box 73210 Chicago, IL 60673-0001	Supplies		4,312.28
Sprint PO Box 4181 Carol Stream, IL 60197-4181	Sprint PO Box 4181 Carol Stream, IL 60197-4181	Services		1,892.85
Terry's Auto PO Box 220467 Orlando, FL 32896-0467	Terry's Auto PO Box 220467 Orlando, FL 32896-0467	Supplies	Disputed	1,200.00
United Metal Craft 219 SW 21 Ter Fort Lauderdale, FL 33312	United Metal Craft 219 SW 21 Ter Fort Lauderdale, FL 33312	Supplies		4,503.99

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

I, the President of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing list and that it is true and correct to the best of my information and belief.

Date **October 21, 2010**Signature **/s/ George Barson**

**George Barson
President**

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

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

In re Modular Medical Systems, Inc.
Debtor

Case No. _____

Chapter 11

LIST OF EQUITY SECURITY HOLDERS

Following is the list of the Debtor's equity security holders which is prepared in accordance with Rule 1007(a)(3) for filing in this chapter 11 case.

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
George & Jill Barson 309 Fernandina St Fort Pierce, FL 34949	Common-Voting	100 %	Tenants by the Entireties

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the President of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date October 21, 2010

Signature /s/ George Barson
George Barson
President

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

AB Consulting Engineers
1320 N Semoran Blvd Ste 102
Orlando FL 32807

Action Brass
406 Farmers Market Rd
Fort Pierce FL 34982

Airgas South Inc
PO Box 532609
Atlanta GA 30353-2609

Aluma-Tech
715 1 Whitney Ave
Lake Worth FL 33462

Barson Holding Company Inc
2701 Industrial Ave 3
Fort Pierce FL 34946

Barson Holding Company Inc
2701 Industrial Ave 3
Fort Pierce FL 34946

BEIC
PO Box 32034
Lakeland FL 33802

Bob Davis
St. Lucie County Tax Collector
Post Office Box 308
Fort Pierce FL 34954-0308

Capital One
PO Box 71083
Charlotte NC 28272-1083

Cleartel
PO Box 6432
Carol Stream IL 60197-6432

Continental Steel
PO Box 030040
Fort Lauderdale FL 33303

Discover Card
PO Box 6103
Carol Stream IL 60197-6103

Eastern Metal Supply Inc
3600 23rd Ave S
Lake Worth FL 33461

Engineering First Class
1516 E Hillcres Street Ste 304
Orlando FL 32803

Fastenal
PO Box 1286
Winona MN 55987-1286

Five Lakes Financial Inc
DBA Tech Financial Services
840 North 3rd St Ste 500
Milwaukee WI 53203

Florida Department of Revenue
Attn Bankruptcy Unit
PO Box 6668
Tallahassee FL 32314-6668

Florida Department of Revenue
Attn Joel Knee Esq
Assistant General Counsel
3111 N University Drive Suite 501
Pompano Beach FL 33065-5096

Florida Department of Revenue
POB 6668
Attn Executive Director Lisa Echeverri
Tallahassee FL 32314-6668

George Barson
309 Fernandina St
Fort Pierce FL 34949

George Barson
309 Fernandina Street
Fort Pierce FL 34949

George Barson
309 Fernandina St
Fort Pierce FL 34949

Hon Eric Holder
Attorney General of the United States
Department of Justice Room 4400
950 Pennsylvania Ave NW
Washington DC 20530-0001

Hon Wifredo A Ferrer
US Attorney So District of Florida
Attention CIVIL PROCESS CLERK
99 NE 4th Street
Miami FL 33132

Internal Revenue Service
Insolvency Unit
7850 SW 6th Ct
Mail Stop 5730
Plantation FL 33324

Internal Revenue Service
Centralized Insolvency Operations
P O Box 21126
Philadelphia PA 19114

Jill Barson
309 Fernandina St
Fort Pierce FL 34949

Jill Barson
309 Fernandina Street
Fort Pierce FL 34949

Jill Barson
309 Fernandina St
Fort Pierce FL 34949

PayPal
PO Box 960080
Orlando FL 32896-0080

Premium Assignment
Po Box 3100
Tallahassee FL 32315-3100

Ricoh
PO box 73210
Chicago IL 60673-0001

Ricoh
PO box 73210
Chicago IL 60673-0001

Sprint
PO Box 4181
Carol Stream IL 60197-4181

TCF Equipment Finance
1100 Wayzata Blvd Ste 801
Minnetonka MN 55305

TD Bank National Association as
Successor to Riverside National Bank
Attn Bharat B Masrani President and CEO
2035 Limestone Road
Wilmington DE 19808

TD Bank National Association as
Successor to Riverside National Bank
Attn Bharat B Masrani President and CEO
2035 Limestone Road
Wilmington DE 19808

TD Bank National Association as
Successor to Riverside National Bank
Attn Bharat B Masrani President and CEO
2035 Limestone Road
Wilmington DE 19808

TD Bank National Association as
Successor to Riverside National Bank
Attn Bharat B Masrani President and CEO
2035 Limestone Road
Wilmington DE 19808

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2035 Limestone Road
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Successor to Riverside National Bank
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2035 Limestone Road
Wilmington DE 19808

TD Bank National Association as
Successor to Riverside National Bank
Attn Bharat B Masrani President and CEO
2035 Limestone Road
Wilmington DE 19808

TD Bank National Association as
Successor to Riverside National Bank
Attn Bharat Masrani President and CEO
2035 Limestone Road
Wilmington DE 19808

Terry's Auto
PO Box 220467
Orlando FL 32896-0467

United Metal Craft
219 SW 21 Ter
Fort Lauderdale FL 33312