B1 (Official Form 1)(12/11)								
	States Bankı thern District						Voluntary	Petition
Name of Debtor (if individual, enter Last, First, 5 Star Insurance Tax & Property Ma	,		Name	of Joint De	ebtor (Spouse)	) (Last, First,	Middle):	
All Other Names used by the Debtor in the last 8 (include married, maiden, and trade names):	3 years		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-Taxpa (if more than one, state all) 71-1041694	yer I.D. (ITIN) No./0	Complete EIN		our digits o		Individual-7	Гахрауег I.D. (ITIN) No	o./Complete EIN
Street Address of Debtor (No. and Street, City, a 8179 West University Drive Apartment 96 Fort Lauderdale, FL	_	ZIP Code	Street	Address of	Joint Debtor	(No. and Str	eet, City, and State):	ZIP Code
County of Residence or of the Principal Place of <b>Broward</b>		33321	Count	y of Reside	ence or of the	Principal Pla	ace of Business:	
Mailing Address of Debtor (if different from stre	eet address):		Mailin	g Address	of Joint Debto	or (if differer	nt from street address):	
	Г	ZIP Code	4					ZIP Code
Location of Principal Assets of Business Debtor (if different from street address above):	1		<u> </u>					
Type of Debtor  (Form of Organization) (Check one box)  □ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form.  □ Corporation (includes LLC and LLP) □ Partnership □ Other (If debtor is not one of the above entities, check this box and state type of entity below.)  Chapter 15 Debtors  Country of debtor's center of main interests:  Each country in which a foreign proceeding by, regarding, or against debtor is pending:  Filing Fee (Check one box. □ Full Filing Fee attached □ Filing Fee to be paid in installments (applicable to attach signed application for the court's consideration.)	(Check Health Care Bu Single Asset Re in 11 U.S.C. § 1 Railroad Stockbroker Commodity Bro Clearing Bank Other  Tax-Exe (Check box Debtor is a tax-ex under Title 26 of Code (the Internal)	mpt Entity , if applicable) empt organization the United State I Revenue Code Check one Deb Check if:	on s). box: tor is a sr tor is not	defined "incurr a perso nall business a small busi	the F er 7 er 9 er 11 er 12 er 13 er primarily co f in 11 U.S.C. § ed by an indivi- nal, family, or f Chap debtor as defin	Ctition is Fi Ct of Cr of Nature (Check Insumer debts, 101(8) as dual primarily thousehold pur ter 11 Debto and in 11 U.S.defined in 11 U.	busine for pose."	ecognition ding ecognition oceeding are primarily ess debts.
debtor is unable to pay fee except in installments. Form 3A.  Filing Fee waiver requested (applicable to chapter attach signed application for the court's consideration)	7 individuals only). Mu	are	less than sapplicable lan is bein eptances	\$2,343,300 ( e boxes: ag filed with of the plan w	amount subject this petition.	to adjustment	on 4/01/13 and every thre	e years thereafter).
Statistical/Administrative Information  Debtor estimates that funds will be available  Debtor estimates that, after any exempt proper there will be no funds available for distribution	erty is excluded and	nsecured credit	tors.			THIS	SPACE IS FOR COURT	USE ONLY
1- 50- 100- 200- 1	1,000- 5,000 10,000		5,001- 0,000	50,001- 100,000	OVER 100,000			
\$0 to \$50,001 to \$100,001 to \$500,001 \$ \$50,000 \$100,000 \$500,000 to \$1 t	\$1,000,001 \$10,000,001 to \$10 to \$50 million	to \$100 to		\$500,000,001 to \$1 billion				
	\$1,000,001 \$10,000,001 to \$50		00,000,001 \$500	\$500,000,001 to \$1 billion				

8/08/12 4:19PM

B1 (Official For	rm 1)(12/11)		Page 2	
Voluntary Petition		Name of Debtor(s): 5 Star Insurance Tax & Property Management. Inc.		
(This page mi	ust be completed and filed in every case)		an a respond management men	
	All Prior Bankruptcy Cases Filed Within Las	t 8 Years (If more than tw	o, attach additional sheet)	
Location Where Filed:	- None -	Case Number:	Date Filed:	
Location Where Filed:		Case Number:	Date Filed:	
Pe	ending Bankruptcy Case Filed by any Spouse, Partner, or	Affiliate of this Debtor (	If more than one, attach additional sheet)	
Name of Deb See Attach		Case Number:	Date Filed:	
District:		Relationship:	Judge:	
	Exhibit A	(T) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Exhibit B s an individual whose debts are primarily consumer debts.)	
forms 10K a pursuant to and is reque	pleted if debtor is required to file periodic reports (e.g., and 10Q) with the Securities and Exchange Commission Section 13 or 15(d) of the Securities Exchange Act of 1934 esting relief under chapter 11.)  A is attached and made a part of this petition.	I, the attorney for the peti have informed the petition 12, or 13 of title 11, Unite	tioner named in the foregoing petition, declare that I ner that [he or she] may proceed under chapter 7, 11, ed States Code, and have explained the relief available I further certify that I delivered to the debtor the notice 42(b).	
			`,	
	Ewi	<u>l</u> nibit C		
<ul><li>No.</li><li>(To be comp</li><li>□ Exhibit</li><li>If this is a jo</li></ul>	pleted by every individual debtor. If a joint petition is filed, ear D completed and signed by the debtor is attached and made	a part of this petition.	-	
		ng the Debtor - Venue		
	_	oplicable box)		
	Debtor has been domiciled or has had a residence, princip days immediately preceding the date of this petition or for	al place of business, or pri		
	There is a bankruptcy case concerning debtor's affiliate, g	eneral partner, or partnersh	nip pending in this District.	
	Debtor is a debtor in a foreign proceeding and has its prin this District, or has no principal place of business or asset proceeding [in a federal or state court] in this District, or t sought in this District.	s in the United States but is	s a defendant in an action or	
	Certification by a Debtor Who Reside	es as a Tenant of Residen blicable boxes)	tial Property	
	Landlord has a judgment against the debtor for possession		oox checked, complete the following.)	
	(Name of landlord that obtained judgment)			
	(Address of landlord)			
	Debtor claims that under applicable nonbankruptcy law, the entire monetary default that gave rise to the judgment			
	Debtor has included in this petition the deposit with the coafter the filing of the petition.	ourt of any rent that would	become due during the 30-day period	
	Debtor certifies that he/she has served the Landlord with t	his certification. (11 U.S.C	C. § 362(l)).	

8/08/12 4:19PM Page 3

# **B1** (Official Form 1)(12/11) Voluntary Petition

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

#### Name of Debtor(s):

5 Star Insurance Tax & Property Management. Inc.

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

I declare under penalty of perjury that the information provided in this petition is true and correct.

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

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

Signature of Debtor

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

Date

#### Signature of Attorney\*

#### X /s/ Brett A. Elam

Signature of Attorney for Debtor(s)

#### **Brett A. Elam 576808**

Printed Name of Attorney for Debtor(s)

#### The Law Offices of Brett A. Elam, P.A.

Firm Name

105 South Narcissus Suite 802

West Palm Beach, FL 33401

Address

Email: belam@brettelamlaw.com

561-833-1113 Fax: 561-833-1115

Telephone Number

# August 8, 2012

Date

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

#### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

# X /s/ Dedrie Thompson

Signature of Authorized Individual

#### **Dedrie Thompson**

Printed Name of Authorized Individual

#### President

Title of Authorized Individual

#### August 8, 2012

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.

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

### Signature of Non-Attorney Bankruptcy Petition Preparer

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

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

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

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

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

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

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

In re 5 Star Insurance Tax & Property Management. Inc. Case No. \_\_\_\_\_

Debtor

# FORM 1. VOLUNTARY PETITION Pending Bankruptcy Cases Filed Attachment

Dedrie Thompson12-2867808/01/12Southern District of FloridaPrincipalJohn K. Olson

Thompson Insurance Agency, Inc. 12-29106 08/08/12
Southern District of Florida Affiliate John K. Olson

**B4** (Official Form 4) (12/07)

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

In re	5 Star Insurance Tax & Property Management. Inc.		Case No.	
		Debtor(s)	Chapter	11

# LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

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

(1)	(2)	(3)	(4)	(5)
Name of creditor and complete mailing address including zip code	Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted	Nature of claim (trade debt, bank loan, government contract, etc.)	Indicate if claim is contingent, unliquidated, disputed, or subject to setoff	Amount of claim [if secured, also state value of security]
Entin & Della Fera, P.A. 110 S.E. 6th Street Fort Lauderdale, FL 33301	Entin & Della Fera, P.A. 110 S.E. 6th Street Fort Lauderdale, FL 33301	Legal Bills		5,000.00
Florida Department of Revenue 5050 West Tennessee Street Building "L" Tallahassee, FL 32399-0112	Florida Department of Revenue 5050 West Tennessee Street Building "L" Tallahassee, FL 32399-0112	Taxes		27,500.00
Pitney Bowes Purchase Power P.O. Box 856042 Louisville, KY 40285-6042	Pitney Bowes Purchase Power P.O. Box 856042 Louisville, KY 40285-6042	Office Supplies		500.00
The Federal Savings Bank c/o Irwim R. Gilbert, Esq. 11000 Prosperity Farms Road Suite 205 Palm Beach Gardens, FL 33410	The Federal Savings Bank c/o Irwim R. Gilbert, Esq. 11000 Prosperity Farms Road Palm Beach Gardens, FL 33410	Business Debt from prior owner	Contingent Unliquidated Disputed	1,850,000.00

B4 (Offi	cial Form 4) (12/07) - Cont.		
In re	5 Star Insurance Tax & Property Management. Inc.	Case No.	
	Debtor(s)	<u> </u>	

# LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

(Continuation Sheet)

(1)	(2)	(3)	(4)	(5)
Name of creditor and complete mailing address including zip code	Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted	Nature of claim (trade debt, bank loan, government contract, etc.)	Indicate if claim is contingent, unliquidated, disputed, or subject to setoff	Amount of claim [if secured, also state value of security]

# 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	August 8, 2012	Signature	/s/ Dedrie Thompson
			Dedrie Thompson
			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.

Allstate Insurance Company c/o Mark Andree P.O. Box 165 Huntington, NY 11743

Entin & Della Fera, P.A. 110 S.E. 6th Street Fort Lauderdale, FL 33301

Florida Department of Revenue 5050 West Tennessee Street Building "L" Tallahassee, FL 32399-0112

Pitney Bowes Purchase Power P.O. Box 856042 Louisville, KY 40285-6042

Saul Strachman 1261 98th Street Miami Beach, FL 33154

The Federal Savings Bank c/o Irwim R. Gilbert, Esq. 11000 Prosperity Farms Road Suite 205 Palm Beach Gardens, FL 33410