

B1 (Official Form 1)(04/13)

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

Voluntary Petition

Name of Debtor (if individual, enter Last, First, Middle): Pain Relief Specialists, 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)/Complete EIN (if more than one, state all) 58-2167419	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): 200 S. Houston Lake Road, Suite A Warner Robins, GA ZIP Code 31088	Street Address of Joint Debtor (No. and Street, City, and State): ZIP Code
County of Residence or of the Principal Place of Business: Houston	County of Residence or of the Principal Place of Business:
Mailing Address of Debtor (if different from street address): ZIP Code	Mailing Address of Joint Debtor (if different from street address): ZIP Code
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	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
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:	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).	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 \$2,490,925 (amount subject to adjustment on 4/01/16 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).
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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 type="checkbox"/> 1-49	<input checked="" 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
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Estimated Assets

<input type="checkbox"/> \$0 to \$50,000	<input type="checkbox"/> \$50,001 to \$100,000	<input type="checkbox"/> \$100,001 to \$500,000	<input checked="" 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
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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 checked="" 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
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THIS SPACE IS FOR COURT USE ONLY

<p>Voluntary Petition</p> <p><i>(This page must be completed and filed in every case)</i></p>	<p>Name of Debtor(s): Pain Relief Specialists, Inc.</p>
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All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet)

Location Where Filed: - None -	Case Number:	Date Filed:
Location Where Filed:	Case Number:	Date Filed:

Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet)

Name of Debtor: - None -	Case Number:	Date Filed:
District:	Relationship:	Judge:

<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>
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Exhibit C

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?

Yes, and Exhibit C is attached and made a part of this petition.

No.

Exhibit D

(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)

Exhibit D completed and signed by the debtor is attached and made a part of this petition.

If this is a joint petition:

Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.

Information Regarding the Debtor - Venue

(Check any applicable box)

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.

There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.

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.

Certification by a Debtor Who Resides as a Tenant of Residential Property

(Check all applicable boxes)

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)

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

Debtor has included with 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.

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):
Pain Relief Specialists, 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.

X _____
Signature of Debtor

X _____
Signature of Joint Debtor

Telephone Number (If not represented by attorney)

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

Address

X _____
Date

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

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

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

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

Signature of Attorney*

X /s/ Wesley J. Boyer
Signature of Attorney for Debtor(s)

Wesley J. Boyer 073126
Printed Name of Attorney for Debtor(s)

Katz, Flatau, & Boyer, L.L.P.
Firm Name

355 Cotton Avenue
Macon, GA 31201

Address

(478) 742-6481 Fax: (478) 742-0108
Telephone Number

August 14, 2015
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/ James G. Shields, Jr.
Signature of Authorized Individual

James G. Shields, Jr.
Printed Name of Authorized Individual

Title of Authorized Individual

August 14, 2015
Date

B4 (Official Form 4) (12/07)

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

In re Pain Relief Specialists, 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>
Bankers Healthcare 325 James Street Syracuse, NY 13203	Bankers Healthcare 325 James Street Syracuse, NY 13203			161,461.84 (0.00 secured)
Bankers Healthcare 325 James Street Syracuse, NY 13203	Bankers Healthcare 325 James Street Syracuse, NY 13203			89,167.78 (0.00 secured)
Baytree National Bank & Trust 9305 A Monroe Road Charlotte, NC 28270	Baytree National Bank & Trust 9305 A Monroe Road Charlotte, NC 28270			33,619.00 (0.00 secured)
Baytree National Bank & Trust 9305 A Monroe Road Charlotte, NC 28270	Baytree National Bank & Trust 9305 A Monroe Road Charlotte, NC 28270			4,914.68
Blue Cross Blue Shield of Georgia Attn: John Iacovelli 3350 Peachtree Rd, NE Mail Stop GAG002-0005 Atlanta, GA 30326	Blue Cross Blue Shield of Georgia Attn: John Iacovelli 3350 Peachtree Rd, NE Atlanta, GA 30326			47,861.07
CAN Capital 2015 Vaughn Rd, Ste 500 Kennesaw, GA 30144	CAN Capital 2015 Vaughn Rd, Ste 500 Kennesaw, GA 30144			155,000.00 (0.00 secured)
Carolina Liquid Chemistries Corp. Department #104 PO Box 37904 Charlotte, NC 28237-7904	Carolina Liquid Chemistries Corp. Department #104 PO Box 37904 Charlotte, NC 28237-7904			20,804.39
Carr, Riggs & Ingram, LLC 202 Love Avenue PO Box 7650 Tifton, GA 31793	Carr, Riggs & Ingram, LLC 202 Love Avenue PO Box 7650 Tifton, GA 31793			4,855.00
CB&T Bank of Middle Georgia 871 Warren Drive Warner Robins, GA 31088	CB&T Bank of Middle Georgia 871 Warren Drive Warner Robins, GA 31088			62,894.00 (0.00 secured)

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

In re **Pain Relief Specialists, 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>
Cowles Clinic Realty	Cowles Clinic Realty			13,672.00
First Lease PO Box 57309 Philadelphia, PA 19111-7309	First Lease PO Box 57309 Philadelphia, PA 19111-7309			15,144.00 (0.00 secured)
Georgia Department of Labor PO Box 740235 Atlanta, GA 30374-0235	Georgia Department of Labor PO Box 740235 Atlanta, GA 30374-0235			20,169.00
Houston County Tax Commissioner Mark Kuchinka PO Box 7799 Warner Robins, GA 31088-7799	Houston County Tax Commissioner Mark Kuchinka PO Box 7799 Warner Robins, GA 31088-7799			5,435.89
Internal Revenue Service 401 W. Peachtree Street, N.W. Stop 334-D Atlanta, GA 30365	Internal Revenue Service 401 W. Peachtree Street, N.W. Stop 334-D Atlanta, GA 30365			73,283.00
Moore Medical, LLC PO Box 4066 Farmington, CT 06032-4066	Moore Medical, LLC PO Box 4066 Farmington, CT 06032-4066			4,726.88
NetSystems, Inc. 829 3rd Avenue Columbus, GA 31901	NetSystems, Inc. 829 3rd Avenue Columbus, GA 31901			6,016.38
Pain Solutions Management Group, LLC 21 Eastman Avenue Bedford, NH 03110	Pain Solutions Management Group, LLC 21 Eastman Avenue Bedford, NH 03110			4,573.75
State Bank & Trust Company PO Box 4748 Macon, GA 31208	State Bank & Trust Company PO Box 4748 Macon, GA 31208			25,000.00
Stearns Bank PO Box 750 Albany, MN 56307-0750	Stearns Bank PO Box 750 Albany, MN 56307-0750			95,556.75 (0.00 secured)
Vendition Partners Attn: Annette Shaffer PO Box 4187 Canton, GA 30114	Vendition Partners Attn: Annette Shaffer PO Box 4187 Canton, GA 30114			5,934.00

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

In re Pain Relief Specialists, Inc.

Case No. _____

Debtor(s)

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

(Continuation Sheet)

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

I, the 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 14, 2015

Signature /s/ James G. Shields, Jr.
James G. Shields, Jr.

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

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

In re **Pain Relief Specialists, Inc.**

Debtor(s)

Case No.

Chapter

11

VERIFICATION OF CREDITOR MATRIX

I, the of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: **August 14, 2015**

/s/ James G. Shields, Jr.

James G. Shields, Jr./

Signer/Title

American Service Industries
PO Box 2244
Macon, GA 31203-2244

American Society of Interventional Pain
81 Lakeview Drive
Paducah, KY 42001

Arrow Exterminators
PO Box 8462
Warner Robins, GA 31095-8462

Ascentium Capital, LLC

ASD Healthcare
PO Box 848104
Dallas, TX 75284-8104

ASI

AT&T Mobility
PO Box 537104
Atlanta, GA 30353-7104

Athene Annuity and Life Company
c/o Cash Processing Center
PO Box 29047
New York, NY 10087-9047

Bankers Healthcare
325 James Street
Syracuse, NY 13203

Banyan International Corporation
Dept CH 14388
Palatine, IL 60055-4388

Baytree National Bank & Trust
9305 A Monroe Road
Charlotte, NC 28270

Blue Cross Blue Shield of Georgia
Attn: John Iacovelli
3350 Peachtree Rd, NE
Mail Stop GAG002-0005
Atlanta, GA 30326

CAN Capital
2015 Vaughn Rd, Ste 500
Kennesaw, GA 30144

Cardinal Health 110, Inc.
c/o Bank of America Lockbox
15898 Collection Ctr Dr
Chicago, IL 60693-0015

Carolina Liquid Chemistries Corp.
Department #104
PO Box 37904
Charlotte, NC 28237-7904

Carr, Riggs & Ingram, LLC
202 Love Avenue
PO Box 7650
Tifton, GA 31793

CB&T Bank of Middle Georgia
871 Warren Drive
Warner Robins, GA 31088

Clint Pharmaceuticals, Inc.
629 Shute Lane
Old Hickory, TN 37138

Compliance Medical Services
25 Easy St, Ste 305
Simi Valley, CA 93065

Corporation Service Company,
as Representative
PO Box 2576
Springfield, IL 62708

Cowles Clinic Realty

Cox Communications
PO Box 61029
New Orleans, LA 70161-1029

crl adjustment

DJO Global, LLC
PO Box 650777
Dallas, TX 75265

Fed Ex
PO Box 660481
Dallas, TX 75266-0400

First Lease
PO Box 57309
Philadelphia, PA 19111-7309

Flint EMC
SEDC
PO Box 530812
Atlanta, GA 30353-0812

FP Mailing Solutions
PO Box 4510
Carol Stream, IL 60197-4510

Georgia Department of Labor
PO Box 740235
Atlanta, GA 30374-0235

Georgia Department of Revenue
PO Box 161108
Atlanta, GA 30321

Guardian
PO Box 824404
Philadelphia, PA 19182-4404

HMWR
PO Box 942
Zebulon, GA 30295

Houston County Tax Commissioner
Mark Kuchinka
PO Box 7799
Warner Robins, GA 31088-7799

Internal Revenue Service
401 W. Peachtree Street, N.W.
Stop 334-D
Atlanta, GA 30365

Lake Oconee Consultants, LLC
1111 Terrell Circle
Greensboro, GA 30642

Marlin Business Bank

Medicus

Medline Industries, Inc.
Dept CH 14400
Palatine, IL 60055-4400

Millennium Laboratories Clinical Supply
16981 Via Tarzon, Suite F
San Diego, CA 92127

Moore Medical, LLC
PO Box 4066
Farmington, CT 06032-4066

MRS of Macon
PO Box 568
Albany, GA 31702-0568

Muzak, LLC
PO Box 71070
Charlotte, NC 28272-1070

Myckowiak Associates
615 Griswold St, Ste 1724
Detroit, MI 48226-3990

NetSystems, Inc.
829 3rd Avenue
Columbus, GA 31901

Pain Solutions Management Group, LLC
21 Eastman Avenue
Bedford, NH 03110

Rotary Club of Greene/Putnam Counties
c/o Edwin L. O'Neal, CPA/Treasurer
2901 Reynolds Walk Trail, Suite 201
Greensboro, GA 30642

Shred-X Corporation
PO Box 5179
Macon, GA 31208

State Bank & Trust Company
PO Box 4748
Macon, GA 31208

Stearns Bank
PO Box 750
Albany, MN 56307-0750

Stericycle, Inc.
PO Box 6582
Carol Stream, IL 60197-6582

Synovus Bank

Synovus Bank
c/o Travis C. Hargrove, Esq.
PO Box 1199
Columbus, GA 31902

T-2 Medical Enterprises, Inc.
Attn: Titus Taube, MD
200 S. Houston Lake Rd, Ste B
Warner Robins, GA 31088

Vendition Partners
Attn: Annette Shaffer
PO Box 4187
Canton, GA 30114

Yellow Pages United
PO Box 53282
Atlanta, GA 30355

Yellow Pages, Inc.
Mail Processing Center
US-Yello
PO Box 41308
Jacksonville, FL 32203-1308

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

In re Pain Relief Specialists, Inc.

Debtor(s)

Case No.

Chapter

11

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for Pain Relief Specialists, Inc. in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

None [*Check if applicable*]

August 14, 2015

Date

/s/ Wesley J. Boyer

Wesley J. Boyer

Signature of Attorney or Litigant
Counsel for Pain Relief Specialists, Inc.

Katz, Flatau, & Boyer, L.L.P.

355 Cotton Avenue

Macon, GA 31201

(478) 742-6481 Fax:(478) 742-0108