

Fill in this information to identify your case:

United States Bankruptcy Court for the:

SOUTHERN DISTRICT OF GEORGIA

Case number (if known) _____ Chapter 11

Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

4/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name INTERIOR & EXTERIOR ASSOCIATES, INC.

2. All other names debtor used in the last 8 years
Include any assumed names, trade names and doing business as names

3. Debtor's federal Employer Identification Number (EIN) 58-1850385

4. Debtor's address	Principal place of business	Mailing address, if different from principal place of business
	<u>2711 MIKE PADGET HIGHWAY AUGUSTA, GA 30906</u> Number, Street, City, State & ZIP Code	_____ P.O. Box, Number, Street, City, State & ZIP Code
	<u>RICHMOND</u> County	_____ Location of principal assets, if different from principal place of business Number, Street, City, State & ZIP Code

5. Debtor's website (URL) _____

6. Type of debtor

Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))

Partnership (excluding LLP)

Other. Specify: _____

Debtor INTERIOR & EXTERIOR ASSOCIATES, INC.
Name

Case number (if known)

7. Describe debtor's business

A. Check one:

- Health Care Business (as defined in 11 U.S.C. § 101(27A))
- Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- Railroad (as defined in 11 U.S.C. § 101(44))
- Stockbroker (as defined in 11 U.S.C. § 101(53A))
- Commodity Broker (as defined in 11 U.S.C. § 101(6))
- Clearing Bank (as defined in 11 U.S.C. § 781(3))
- None of the above

B. Check all that apply

- Tax-exempt entity (as described in 26 U.S.C. §501)
- Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.
See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

8. Under which chapter of the Bankruptcy Code is the debtor filing?

Check one:

- Chapter 7
- Chapter 9

Chapter 11. Check all that apply:

- Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after that).
- The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- A plan is being filed with this petition.
- Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

- No.
- Yes.

If more than 2 cases, attach a separate list.

District _____	When _____	Case number _____
District _____	When _____	Case number _____

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?

- No
- Yes.

List all cases. If more than 1, attach a separate list

Debtor _____	Relationship _____
District _____	When _____ Case number, if known _____

Debtor **INTERIOR & EXTERIOR ASSOCIATES, INC.**
Name

Case number (if known)

11. Why is the case filed in this district?

Check all that apply:

- Debtor has had its domicile, 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.
- A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

No

Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (Check all that apply.)

It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard? _____

It needs to be physically secured or protected from the weather.

It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

Other _____

Where is the property?

Number, Street, City, State & ZIP Code

Is the property insured?

No

Yes. Insurance agency _____

Contact name _____

Phone _____

Statistical and administrative information

13. Debtor's estimation of available funds

Check one:

- Funds will be available for distribution to unsecured creditors.
- After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000 | <input type="checkbox"/> 25,001-50,000 |
| <input type="checkbox"/> 50-99 | <input type="checkbox"/> 5001-10,000 | <input type="checkbox"/> 50,001-100,000 |
| <input type="checkbox"/> 100-199 | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999 | | |

15. Estimated Assets

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

16. Estimated liabilities

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

Debtor INTERIOR & EXTERIOR ASSOCIATES, INC.
Name

Case number (if known)

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

17. Declaration and signature of authorized representative of debtor

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

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on August 8, 2017
MM / DD / YYYY

/s/ JERRY EARL EDWARDS, JR.
Signature of authorized representative of debtor

Title CFO, DIRECTOR AND SHAREHOLDER

JERRY EARL EDWARDS, JR.
Printed name

18. Signature of attorney

/s/ Charles W. Wills
Signature of attorney for debtor

Date August 8, 2017
MM / DD / YYYY

Charles W. Wills
Printed name

Wills Law Firm, LLC
Firm name

318 Jackson Street
P.O. Box 1620
Thomson, GA 30824
Number, Street, City, State & ZIP Code

Contact phone 706-595-8100 Email address _____

254329
Bar number and State

Fill in this information to identify the case:

Debtor name INTERIOR & EXTERIOR ASSOCIATES, INC.

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF GEORGIA

Case number (if known) _____

Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- Schedule A/B: Assets—Real and Personal Property (Official Form 206A/B)
- Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)
- Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)
- Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G)
- Schedule H: Codebtors (Official Form 206H)
- Summary of Assets and Liabilities for Non-Individuals (Official Form 206Sum)
- Amended Schedule _____
- Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)
- Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on August 8, 2017

X /s/ JERRY EARL EDWARDS, JR.

Signature of individual signing on behalf of debtor

JERRY EARL EDWARDS, JR.

Printed name

CFO, DIRECTOR AND SHAREHOLDER

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name **INTERIOR & EXTERIOR ASSOCIATES, INC.**
 United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF GEORGIA**
 Case number (if known): _____

Check if this is an amended filing

Official Form 204**Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders**

12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
AUGUSTA UTILITIES DEPARTMENT P.O. BOX 1457 AUGUSTA, GA 30903						\$19.20
CK SUPPLY COMPANY P. O. BOX 415421 BOSTON, MA 02241-5421						\$119,916.57
CPA ADVISORS, LLC 432 S. BELAIR ROAD MARTINEZ, GA 30907						\$1,075.00
FORD MOTOR CREDIT COMPANY P.O. BOX 790093 SAINT LOUIS, MO 63179		3 Ford Trucks		\$110,000.00	\$0.00	\$110,000.00
GA DEPARTMENT OF REVENUE BANKRUPTCY SECTION 1800 CENTURY BLVD, NE, SUITE 9100 ATLANTA, GA 30345			Disputed			Unknown
HUMANA EMP HP PO BOX 524 CAROL STREAM, IL 60132-0524						\$3,598.56

Debtor **INTERIOR & EXTERIOR ASSOCIATES, INC.**

Case number (if known)

Name

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
INTERNAL REVENUE SERVICE P.O. BOX 7346 PHILADELPHIA, PA 19101-7346			Disputed			Unknown
LOWE'S P.O. BOX 530954 ATLANTA, GA 30353						\$3,829.13
MANER BUILDERS SUPPLY CO. P.O. BOX 204598 AUGUSTA, GA 30917						\$28,390.32
MERIT FLOORING P.O. BOX 14519 AUGUSTA, GA 30919						\$6,560.00
QUEENSBOROUGH NATIONAL BANK & TRUST ATTN: KATHY COBB P.O. BOX 467 LOUISVILLE, GA 30434		Real Property at 2711 Mike Padget Hwy and a blanket UCC against accounts receivable		\$100,000.00	\$0.00	\$100,000.00
RELIABLE EQUIPMENT RENTALS P.O. BOX 3047 EVANS, GA 30809						\$17,291.80
SHERWIN-WILLIAM S 201 CASA LINDA DRIVE MARTINEZ, GA 30907						\$324.47
STATE OF GEORGIA DEPT. OF LABOR 148 ANDREW YOUNG INTERNATIONAL BLVD SUSSEX PLACE - ROOM 738 ATLANTA, GA 30303			Disputed			\$0.00
TRIAD SPECIALTIES, INC. P.O. BOX 14009 AUGUSTA, GA 30919						\$4,787.20

Debtor **INTERIOR & EXTERIOR ASSOCIATES, INC.**
Name _____

Case number (if known) _____

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
TUCKER MATERIAL OF COLUMBIA, INC. 728 VINE STREET COLUMBIA, SC 29201						\$39,005.75
UNITED RENTALS (NORTH AMERICA), INC. 100 FIRST STAMFORD PLACE SUITE 700 STAMFORD, CT 06902						\$10,907.70
YP P.O. BOX 105024 ATLANTA, GA 30348						\$165.90

Fill in this information to identify the case:

Debtor name INTERIOR & EXTERIOR ASSOCIATES, INC.

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF GEORGIA

Case number (if known) _____

Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A	Column B	
		Amount of claim	Value of collateral that supports this claim	
		Do not deduct the value of collateral.		
2.1	<p>FORD MOTOR CREDIT COMPANY Creditor's Name</p> <p>P.O. BOX 790093 SAINT LOUIS, MO 63179 Creditor's mailing address</p> <p>_____ Creditor's email address, if known</p> <p>Date debt was incurred</p> <p>Last 4 digits of account number</p> <p>Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.</p>	<p>Describe debtor's property that is subject to a lien 3 Ford Trucks</p> <hr/> <p>Describe the lien</p> <hr/> <p>Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)</p> <hr/> <p>As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>	<p>\$110,000.00</p>	<p>\$0.00</p>

2.2	<p>QUEENSBOROUGH NATIONAL BANK & TRUST Creditor's Name</p> <p>ATTN: KATHY COBB P.O. BOX 467 LOUISVILLE, GA 30434 Creditor's mailing address</p> <p>_____ Creditor's email address, if known</p> <p>Date debt was incurred</p> <p>Last 4 digits of account number</p> <p>Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.</p>	<p>Describe debtor's property that is subject to a lien Real Property at 2711 Mike Padget Hwy and a blanket UCC against accounts receivable</p> <hr/> <p>Describe the lien</p> <hr/> <p>Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)</p> <hr/> <p>As of the petition filing date, the claim is: Check all that apply</p>	<p>\$100,000.00</p>	<p>\$0.00</p>
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Debtor INTERIOR & EXTERIOR ASSOCIATES, INC.
Name

Case number (if know) _____

- No
- Yes. Specify each creditor, including this creditor and its relative priority.
- Contingent
- Unliquidated
- Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any. \$210,000.00

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address	On which line in Part 1 did you enter the related creditor?	Last 4 digits of account number for this entity

Fill in this information to identify the case:

Debtor name INTERIOR & EXTERIOR ASSOCIATES, INC.

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF GEORGIA

Case number (if known) _____

Check if this is an amended filing

Official Form 206E/F
Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

No. Go to Part 2.

Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount	
2.1	Priority creditor's name and mailing address GA DEPARTMENT OF REVENUE BANKRUPTCY SECTION 1800 CENTURY BLVD, NE, SUITE 9100 ATLANTA, GA 30345 <hr/> Date or dates debt was incurred <hr/> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <hr/> Basis for the claim: <hr/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$18,000.00	Unknown
2.2	Priority creditor's name and mailing address INTERNAL REVENUE SERVICE P.O. BOX 7346 PHILADELPHIA, PA 19101-7346 <hr/> Date or dates debt was incurred <hr/> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <hr/> Basis for the claim: <hr/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$129,000.00	Unknown

Debtor **INTERIOR & EXTERIOR ASSOCIATES, INC.**
Name

Case number (if known)

2.3	Priority creditor's name and mailing address STATE OF GEORGIA DEPT. OF LABOR 148 ANDREW YOUNG INTERNATIONAL BLVD SUSSEX PLACE - ROOM 738 ATLANTA, GA 30303	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Unknown \$0.00
Date or dates debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number _____		Is the claim subject to offset?	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

			Amount of claim
3.1	Nonpriority creditor's name and mailing address AUGUSTA UTILITIES DEPARTMENT P.O. BOX 1457 AUGUSTA, GA 30903 Date(s) debt was incurred _____ Last 4 digits of account number <u>2403</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$19.20
3.2	Nonpriority creditor's name and mailing address CK SUPPLY COMPANY P. O. BOX 415421 BOSTON, MA 02241-5421 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$119,916.57
3.3	Nonpriority creditor's name and mailing address CPA ADVISORS, LLC 432 S. BELAIR ROAD MARTINEZ, GA 30907 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,075.00
3.4	Nonpriority creditor's name and mailing address HUMANA EMP HP PO BOX 524 CAROL STREAM, IL 60132-0524 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,598.56
3.5	Nonpriority creditor's name and mailing address LOWE'S P.O. BOX 530954 ATLANTA, GA 30353 Date(s) debt was incurred _____ Last 4 digits of account number <u>8329</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,829.13

Debtor **INTERIOR & EXTERIOR ASSOCIATES, INC.**
Name

Case number (if known)

3.6	<p>Nonpriority creditor's name and mailing address MANER BUILDERS SUPPLY CO. P.O. BOX 204598 AUGUSTA, GA 30917 Date(s) debt was incurred __ Last 4 digits of account number <u>1477</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$28,390.32</p>
3.7	<p>Nonpriority creditor's name and mailing address MERIT FLOORING P.O. BOX 14519 AUGUSTA, GA 30919 Date(s) debt was incurred __ Last 4 digits of account number __</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$6,560.00</p>
3.8	<p>Nonpriority creditor's name and mailing address RELIABLE EQUIPMENT RENTALS P.O. BOX 3047 EVANS, GA 30809 Date(s) debt was incurred __ Last 4 digits of account number __</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$17,291.80</p>
3.9	<p>Nonpriority creditor's name and mailing address SHERWIN-WILLIAMS 201 CASA LINDA DRIVE MARTINEZ, GA 30907 Date(s) debt was incurred __ Last 4 digits of account number __</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$324.47</p>
3.10	<p>Nonpriority creditor's name and mailing address TRIAD SPECIALTIES, INC. P.O. BOX 14009 AUGUSTA, GA 30919 Date(s) debt was incurred __ Last 4 digits of account number __</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$4,787.20</p>
3.11	<p>Nonpriority creditor's name and mailing address TUCKER MATERIAL OF COLUMBIA, INC. 728 VINE STREET COLUMBIA, SC 29201 Date(s) debt was incurred __ Last 4 digits of account number <u>1271</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$39,005.75</p>
3.12	<p>Nonpriority creditor's name and mailing address UNITED RENTALS (NORTH AMERICA), INC. 100 FIRST STAMFORD PLACE SUITE 700 STAMFORD, CT 06902 Date(s) debt was incurred __ Last 4 digits of account number __</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$10,907.70</p>

Debtor **INTERIOR & EXTERIOR ASSOCIATES, INC.**
Name

Case number (if known)

3.13	Nonpriority creditor's name and mailing address YP P.O. BOX 105024 ATLANTA, GA 30348 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$165.90
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Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	IRS - Attn: Belinda Griffin White 3154 Perimeter Parkway Phoenix Building 3, Suite 108 AUGUSTA, GA 30909	Line <u>2.2</u> <input type="checkbox"/> Not listed. Explain ____	--
4.2	OFFICE OF THE U.S. ATTORNEY P.O. BOX 2017 AUGUSTA, GA 30903	Line <u>2.2</u> <input type="checkbox"/> Not listed. Explain ____	--

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

		Total of claim amounts
5a. Total claims from Part 1	5a. \$	147,000.00
5b. Total claims from Part 2	5b. + \$	235,871.60
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c. \$	382,871.60

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

In re INTERIOR & EXTERIOR ASSOCIATES, INC.

Debtor(s)

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
CECIL MERVIN ELLIOT, JR. 5235 Farmers Bridge Road HEPHZIBAH, GA 30815-5511	STOCKHOLDE R	33.33%	STOCKHOLDER
ESTATE OF JERRY EDWARDS, SR	STOCKHOLDE R	33.33%	STOCKHOLDER
JERRY EDWARDS, JR. P.O. Box 391 HEPHZIBAH, GA 30815-0391	STOCKHOLDE R	33.33%	STOCKHOLDER

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the **CFO, DIRECTOR AND SHAREHOLDER** 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 August 8, 2017

Signature /s/ JERRY EARL EDWARDS, JR.
JERRY EARL EDWARDS, JR.

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

INTERIOR & EXTERIOR ASSOCIATES,
2711 MIKE PADGET HIGHWAY
AUGUSTA GA 30906

INDIANA EMP HP
PO BOX 524
CAROL STREAM IL 60132-0524

RELIABLE EQUIPMENT RENTALS
P.O. BOX 3047
EVANS GA 30809

CHARLES W. WILLS
WILLS LAW FIRM, LLC
318 JACKSON STREET
P.O. BOX 1620
THOMSON, GA 30824

INTERNAL REVENUE SERVICE
P.O. BOX 7346
PHILADELPHIA PA 19101-7346

SHERWIN-WILLIAMS
201 CASA LINDA DRIVE
MARTINEZ GA 30907

AUGUSTA UTILITIES DEPARTMENT
P.O. BOX 1457
AUGUSTA GA 30903

IRS - ATTN: BELINDA GRIFFIN WHITE
3154 PERIMETER PARKWAY
PHOENIX BUILDING 3, SUITE 108
AUGUSTA GA 30909

STATE OF GEORGIA DEPT. OF LA
148 ANDREW YOUNG INTERNATB
SUSSEX PLACE - ROOM 738
ATLANTA GA 30303

CECIL MERVIN ELLIOT, JR.
5235 FARMERS BRIDGE ROAD
HEPHZIBAH GA 30815-5511

JERRY EDWARDS, JR.
P.O. BOX 391
HEPHZIBAH GA 30815-0391

TRIAD SPECIALTIES, INC.
P.O. BOX 14009
AUGUSTA GA 30919

CK SUPPLY COMPANY
P. O. BOX 415421
BOSTON MA 02241-5421

LOWE'S
P.O. BOX 530954
ATLANTA GA 30353

TUCKER MATERIAL OF COLUMBIA
728 VINE STREET
COLUMBIA SC 29201

CPA ADVISORS, LLC
432 S. BELAIR ROAD
MARTINEZ GA 30907

MANER BUILDERS SUPPLY CO.
P.O. BOX 204598
AUGUSTA GA 30917

UNITED RENTALS (NORTH AMER)
100 FIRST STAMFORD PLACE
SUITE 700
STAMFORD CT 06902

ESTATE OF JERRY EDWARDS, SR

MERIT FLOORING
P.O. BOX 14519
AUGUSTA GA 30919

YP
P.O. BOX 105024
ATLANTA GA 30348

FORD MOTOR CREDIT COMPANY
P.O. BOX 790093
SAINT LOUIS MO 63179

OFFICE OF THE U.S. ATTORNEY
P.O. BOX 2017
AUGUSTA GA 30903

GA DEPARTMENT OF REVENUE
BANKRUPTCY SECTION
1800 CENTURY BLVD, NE, SUITE 9100
ATLANTA GA 30345

QUEENSBOROUGH NATIONAL BANK & TRUST
ATTN: KATHY COBB
P.O. BOX 467
LOUISVILLE GA 30434

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

In re INTERIOR & EXTERIOR ASSOCIATES, 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 INTERIOR & EXTERIOR ASSOCIATES, 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 8, 2017

Date

/s/ Charles W. Wills

Charles W. Wills 254329

Signature of Attorney or Litigant

Counsel for INTERIOR & EXTERIOR ASSOCIATES, INC.

Wills Law Firm, LLC

318 Jackson Street

P.O. Box 1620

Thomson, GA 30824

706-595-8100 Fax:706-595-9034