

Official Form 1 (04/10)

United States Bankruptcy Court NORTHERN DISTRICT OF INDIANA		Voluntary Petition
Name of Debtor (if individual, enter Last, First, Middle): Daniel M. Bade, DDS, P.C., a Corporation		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): dba Smile Solutions, Inc.		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): 36-3193959		Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) Complete EIN (if more than one, state all):
Street Address of Debtor (No. and Street, City, and State): 8217 Wicker Avenue Saint John IN		Street Address of Joint Debtor (No. and Street, City, and State):
ZIPCODE 46373		ZIPCODE
County of Residence or of the Principal Place of Business: Lake		County of Residence or of the Principal Place of Business:
Mailing Address of Debtor (if different from street address): SAME		Mailing Address of Joint Debtor (if different from street address):
ZIPCODE		ZIPCODE
Location of Principal Assets of Business Debtor (if different from street address above): SAME		ZIPCODE
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 <hr/>	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 type="checkbox"/> Other 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. Chapter 11 Debtors: Check one box: <input checked="" type="checkbox"/> Debtor is a small business as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input checked="" 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).
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.		
Statistical/Administrative Information <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" 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 checked="" 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 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		

Voluntary Petition <i>(This page must be completed and filed in every case)</i>		Name of Debtor(s): Daniel M. Bade, DDS, P.C. , a Corporation	
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:	
Exhibit A (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under Chapter 11) <input checked="" type="checkbox"/> Exhibit A is attached and made a part of this petition	Exhibit B (To be completed if debtor is an individual whose debts are primarily consumer debts) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I have delivered to the debtor the notice required by 11 U.S.C. §342(b). X _____ 10/20/2010 Signature of Attorney for Debtor(s) Date		
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? <input type="checkbox"/> Yes, and exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> 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.) <input type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made part of this petition. If this is a joint petition: <input type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.			
Information Regarding the Debtor - Venue (Check any applicable box)			
<input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.			
<input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.			
<input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action 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.)			
<input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)			
_____ (Name of landlord that obtained judgment)			
_____ (Address of landlord)			
<input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and			
<input type="checkbox"/> Debtor has included 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.			
<input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).			

<p>Voluntary Petition <i>(This page must be completed and filed in every case)</i></p>	<p>Name of Debtor(s): Daniel M. Bade, DDS, P.C. , a Corporation</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.</p> <p>[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><u>10/20/2010</u> (Date)</p>
<p style="text-align: center;">Signature of Attorney*</p> <p>X /s/ Daniel L. Freeland Signature of Attorney for Debtor(s)</p> <p><u>Daniel L. Freeland 6979-45</u> Printed Name of Attorney for Debtor(s)</p> <p><u>Daniel L. Freeland & Associates, P.C.</u> Firm Name</p> <p><u>9105 Indianapolis Boulevard</u> Address</p> <p>_____ <u>Highland IN 46322</u></p> <p><u>(219)922-0800</u> Telephone Number</p> <p><u>10/20/2010</u> 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 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 _____</p> <p>_____ Date</p> <p>Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social-Security number is provided</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 the relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>X /s/ Daniel M. Bade Signature of Authorized Individual</p> <p><u>Daniel M. Bade</u> Printed Name of Authorized Individual</p> <p><u>President</u> Title of Authorized Individual</p> <p><u>10/20/2010</u> Date</p>	<p>_____ Date</p> <p>Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social-Security number is provided</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>

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF INDIANA
NORTHERN DIVISION

In re Daniel M. Bade, DDS, P.C.,
a Corporation
dba Smile Solutions, Inc.

Case No.
Chapter 11

_____ / Debtor

Exhibit "A" to Voluntary Petition

(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 of the Bankruptcy Code, this Exhibit "A" shall be completed and attached to the petition.)

1. If any of debtor's securities are registered under section 12 of the Securities and Exchange Act of 1934, the SEC file number is _____.
2. The following financial data is the latest available information and refers to the debtor's condition on _____.
a. Total assets \$ 0.00
b. Total debts (including debts listed in 2.c., below) \$ 1,049,125.24
c. Debt securities held by more than 500 holders.
Table with columns: Debt Issue, Type, Total \$ Amount Outstanding, Approximate Number of Holders.
d. Number of shares of preferred stock
e. Number of shares of common stock
Comments, if any:
3. Brief description of debtor's business:
4. List the name of any person who directly or indirectly owns, controls, or holds, with power to vote, 5% or more of the voting securities of the debtor:

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF INDIANA
NORTHERN DIVISION**

In re *Daniel M. Bade, DDS, P.C. , a Corporation*
dba Smile Solutions, Inc.

Case No.
Chapter 11

_____/ Debtor
Attorney for Debtor: *Daniel L. Freeland*

STATEMENT PURSUANT TO RULE 2016(B)

The undersigned, pursuant to Rule 2016(b), Bankruptcy Rules, states that:

1. The undersigned is the attorney for the debtor(s) in this case.
2. The compensation paid or agreed to be paid by the debtor(s), to the undersigned is:

a) For legal services rendered or to be rendered in contemplation of and in connection with this case	\$ <u>10,000.00</u>
b) Prior to the filing of this statement, debtor(s) have paid	\$ <u>10,000.00</u>
c) The unpaid balance due and payable is	\$ <u>0.00</u>
3. \$ 1,039.00 of the filing fee in this case has been paid.
4. The Services rendered or to be rendered include the following:
 - a) Analysis of the financial situation, and rendering advice and assistance to the debtor(s) in determining whether to file a petition under title 11 of the United States Code.
 - b) Preparation and filing of the petition, schedules, statement of financial affairs and other documents required by the court.
 - c) Representation of the debtor(s) at the meeting of creditors.
5. The source of payments made by the debtor(s) to the undersigned was from earnings, wages and compensation for services performed, and
None other
6. The source of payments to be made by the debtor(s) to the undersigned for the unpaid balance remaining, if any, will be from earnings, wages and compensation for services performed, and
None other
7. The undersigned has received no transfer, assignment or pledge of property from debtor(s) except the following for the value stated:
None
8. The undersigned has not shared or agreed to share with any other entity, other than with members of undersigned's law firm, any compensation paid or to be paid except as follows:
None

Dated: 10/20/2010

Respectfully submitted,

X/s/ Daniel L. Freeland
 Attorney for Petitioner: *Daniel L. Freeland*
Daniel L. Freeland & Associates, P.C.
9105 Indianapolis Boulevard
Highland IN 46322

(219)922-0800
 dlf9601b@aol.com

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF INDIANA
NORTHERN DIVISION**

In re *Daniel M. Bade, DDS, P.C.*
a *Corporation*
dba *Smile Solutions, Inc.*

Case No.
Chapter 11

Debtor(s)

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 and Fed. R. Bankr. P. 1007(m).

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)
1 <i>Harris, N.A.</i> 9801 Connecticut Crown Point IN 46307	Phone: <i>Harris, N.A.</i> 9801 Connecticut Crown Point IN 46307	UCC	Value: Net Unsecured:	\$ 497,749.67 \$ 0.00 \$ 497,749.67
2 <i>Matsco</i> c/o James E. Rossow Jr. 342 Massachusetts Ave. Suite Indianapolis IN 46204	Phone: <i>Matsco</i> 2000 Powell Street 4th Floor Emeryville CA 94608	UCC	*Value: Net Unsecured: *Prior Liens Exist	\$ 256,272.06 \$ 0.00 \$ 256,272.06
3 <i>Daniel Bade</i> 8251 Meadow Lane Saint John IN 46373	Phone: <i>Daniel Bade</i> 8251 Meadow Lane Saint John IN 46373	Personal Loan		\$ 139,628.01
4 <i>Harris, N.A.</i> 9801 Connecticut Crown Point IN 46307	Phone: <i>Harris, N.A.</i> 9801 Connecticut Crown Point IN 46307	Personal Loan		\$ 74,000.00
5 <i>Meyers Development Corp.</i> 9725 Parkway Drive Highland IN 46322	Phone: <i>Myer Development Corp.</i> 9725 Parkway Drive Highland IN 46322	Build-out lease hold	Value: Net Unsecured:	\$ 40,840.03 \$ 0.00 \$ 40,840.03

Debtor(s)

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

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)
6 Ford Motor Credit 9930 Federal Dr Colorado Springs CO 80921	Phone: Ford Motor Credit 9930 Federal Dr Colorado Springs CO 80921	UCC	Value: Net Unsecured:	\$ 25,234.47 \$ 0.00 \$ 25,234.47
7 Midwest Telecom of America 1567 E 93rd Ave Merrillville IN 46410	Phone: Midwest Telecom of America 1567 E 93rd Ave Merrillville IN 46410	Business Debt		\$ 9,600.00
8 D&S Real Property LLC 8251 Meadow Lane Roselawn IN 46372	Phone: D&S Real Properties LLC 8251 Meadow LN Saint John IN 46373	Personal Loan		\$ 5,500.00
9 Pitney Bowes PO Box 5151 Shelton CT 06484	Phone: Pitney Bowes PO Box 5151 Shelton CT 06484	Services Rendered		\$ 300.00
10 State of Indiana Office of Medicaid Policy 402 W Washington, Room W451 Indianapolis IN 46204	Phone: State of Indiana Office of Medicaid Policy 402 W Washington, Room W451 Indianapolis IN 46204	Medicade billing dispute	D	\$ 1.00

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION

I, Daniel M. Bade, President of the Corporation named as debtor in this case, declare under penalty of perjury that I have read the foregoing List of Creditors Holding Twenty Largest Unsecured Claims and that they are true and correct to the best of my knowledge, information and belief.

Date: 10/20/2010

Signature /s/ Daniel M. Bade
Name: Daniel M. Bade
Title: President

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF INDIANA
NORTHERN DIVISION**

In re *Daniel M. Bade, DDS, P.C.* ,
a Corporation
dba *Smile Solutions, Inc.*

Case No.
Chapter 11

_____/ Debtor

Attorney for Debtor: *Daniel L. Freeland*

VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

Date: 10/20/2010

/s/ Daniel M. Bade
Debtor

D&S REAL PROPERTIES LLC
8251 MEADOW LN
SAINT JOHN, IN 46373

D&S REAL PROPERTY LLC
8251 MEADOW LANE
ROSELAWN, IN 46372

DANIEL BADE
8251 MEADOW LANE
SAINT JOHN, IN 46373

FORD MOTOR CREDIT
9930 FEDERAL DR
COLORADO SPRINGS, CO 80921

HARRIS, N.A.
9801 CONNECTICUT
CROWN POINT, IN 46307

KENNETH MANNING
200 MONTICELLO DRIVE
DYER, IN 46311

MATSCO
C/O JAMES E. ROSSOW JR.
342 MASSACHUETTS AVE. SUITE 50
INDIANAPOLIS, IN 46204

MATSCO
2000 POWELL STREET 4TH FLOOR
EMERYVILLE, CA 94608

MEYERS DEVELOPMENT CORP.
9725 PARKWAY DRIVE
HIGHLAND, IN 46322

MIDWEST TELECOM OF AMERICA
1567 E 93RD AVE
MERRILLVILLE, IN 46410

MEYERS DEVELOPMENT CORP.
9725 PARKWAY DRIVE
HIGHLAND, IN 46322

MYER DEVELOPMENT CORP.
9725 PARKWAY DRIVE
HIGHLAND, IN 46322

PITNEY BOWES
PO BOX 5151
SHELTON, CT 06484

STATE OF INDIANA
OFFICE OF MEDICAID POLICY
402 W WASHINGTON, ROOM W451
INDIANAPOLIS, IN 46204

RHET L. TAUBER
1415 EAGLE RIDGE DRIVE
SCHERERVILLE, IN 46375