

Fill in this information to identify your case:

United States Bankruptcy Court for the:

WESTERN DISTRICT OF LOUISIANA

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 Central Louisiana Home Healthcare, LLC

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) 72-1047681

4. Debtor's address	Principal place of business	Mailing address, if different from principal place of business
	<u>1601 Jackson Street</u> <u>Alexandria, LA 71301</u> Number, Street, City, State & ZIP Code	_____ P.O. Box, Number, Street, City, State & ZIP Code
	<u>Rapides</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: _____

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 _____

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

1-49

50-99

100-199

200-999

1,000-5,000

5001-10,000

10,001-25,000

25,001-50,000

50,001-100,000

More than 100,000

15. Estimated Assets

\$0 - \$50,000

\$50,001 - \$100,000

\$100,001 - \$500,000

\$500,001 - \$1 million

\$1,000,001 - \$10 million

\$10,000,001 - \$50 million

\$50,000,001 - \$100 million

\$100,000,001 - \$500 million

\$500,000,001 - \$1 billion

\$1,000,000,001 - \$10 billion

\$10,000,000,001 - \$50 billion

More than \$50 billion

16. Estimated liabilities

\$0 - \$50,000

\$50,001 - \$100,000

\$100,001 - \$500,000

\$500,001 - \$1 million

\$1,000,001 - \$10 million

\$10,000,001 - \$50 million

\$50,000,001 - \$100 million

\$100,000,001 - \$500 million

\$500,000,001 - \$1 billion

\$1,000,000,001 - \$10 billion

\$10,000,000,001 - \$50 billion

More than \$50 billion

Debtor Central Louisiana Home Healthcare, LLC
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 22, 2017
MM / DD / YYYY

/s/ Thomas E. Cupples, II
Signature of authorized representative of debtor

Title Member/Manager

Thomas E. Cupples, II
Printed name

18. Signature of attorney

/s/ Bradley L. Drell
Signature of attorney for debtor

Date August 22, 2017
MM / DD / YYYY

Bradley L. Drell
Printed name

Gold, Weems, Bruser, Sues & Rundell
Firm name

POB 6118
Alexandria, LA 71307-6118
Number, Street, City, State & ZIP Code

Contact phone (318)445-6471 Email address _____

24387 - LA
Bar number and State

Fill in this information to identify the case:

Debtor name Central Louisiana Home Healthcare, LLC
 United States Bankruptcy Court for the: WESTERN DISTRICT OF LOUISIANA
 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		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Advanced Office System P.O. Box 83457 Baton Rouge, LA 70884						\$2,822.29
Beebe's Pest & Termite Control 9251 Raton Ave. Baton Rouge, LA 70814						\$785.00
Biehl & Biehl P.O. Box 87410 Carol Stream, IL 60188-7410						\$2,074.40
Bit Happens PC Solutions P.O. Box 12561 Alexandria, LA 71315						\$6,936.10
Cupples Holdings, LLC 1535 Jackson Street Alexandria, LA 71301						\$47,800.00
eSolutions, Inc. WS #165 P.O. Box 414378 Kansas City, MO 64141						\$4,752.16
Gannett Newspapers of LA P.O. Box 677326 Dallas, TX 75267-7326						\$1,089.67

Debtor **Central Louisiana Home Healthcare, LLC**
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
Hanover Insurance Company P.O. Box 580045 Charlotte, NC 28258-0045						\$1,179.07
Herndon Jeansonne, MD P.O. Box 456 Cottonport, LA 71327						\$2,700.00
InHome Medical Solutions 8500 Baycenter Rd., Ste. 25 Jacksonville, FL 32256						\$14,222.41
Jones Walker, LLP 201 St. Charles Ave. New Orleans, LA 70170-5100						\$20,675.65
LA Dept of Revenue Withholding Tax P.O. Box 91017 Baton Rouge, LA 70821-9017						\$750.00
LA Occupational Health Services P.O. Box 11767 Alexandria, LA 71315-1767						\$835.00
MedExpress Ambulance Service 708 S. Union Street Opelousas, LA 70570						\$5,434.00
Monster Worldwide P.O. Box 90364 Chicago, IL 60696-0364						\$750.00
Opelousas General Hospital P.O. Box 1389 Opelousas, LA 70571-1389						\$1,514.98
Rapides Senior Citizen Center Visible Horizon Advertising 209 E. Shamrock Street Pineville, LA 71360						\$684.00

Debtor **Central Louisiana Home Healthcare, LLC**
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
Staples Advantage Dept. ALT P.O. Box 405386 Atlanta, GA 30384-5386						\$1,089.98
United Healthcare Attn: Johnson & Rountree P.O. Box 203921 Houston, TX 77216						\$1,629.84
ZirMed 1311 Solutions Center Chicago, IL 60677-1311						\$803.00

ADT Security Services
P.O. Box 660418
Dallas, TX 75266-0418

Advanced Office System
P.O. Box 83457
Baton Rouge, LA 70884

Andrepoint Printing
5043 I-49 South
Opelousas, LA 70570

Ark Graphics, Inc.
9201 Warren Pkwy, Ste. 3200
Frisco, TX 75035

Avoyelles Publishing
105 North Main Street
P.O. Box 36
Marksville, LA 71351

Beebe's Pest & Termite Control
9251 Raton Ave.
Baton Rouge, LA 70814

Biehl & Biehl
P.O. Box 87410
Carol Stream, IL 60188-7410

Bit Happens PC Solutions
P.O. Box 12561
Alexandria, LA 71315

Bodemuller
P.O. Box 27
Opelousas, LA 70571-0027

Bunkie General Hospital
P.O. Box 380
Bunkie, LA 71322

Cenla Focus
P.O. Box 774
Alexandria, LA 71309

Central LA Chamber of Commerce
P.O. Box 992
Alexandria, LA 71309-0992

CLECO Power, LLC
P.O. Box 660228
Dallas, TX 75266-0228

CLIA Laboratory Program
P.O. Box 530882
Atlanta, GA 30353-0882

Conexis
P.O. Box 6241
Orange, CA 92863-6241

CPL American Medical Collection
4 Westchester Plaza, Bldg. 4
Elmsford, NY 10523

CPL Reliapath
P.O. Box 54295
New Orleans, LA 70154-4295

Cupples Holdings, LLC
1535 Jackson Street
Alexandria, LA 71301

Deyta
7400 New LaGrange Rd., Ste. 200
Louisville, KY 40222

Don's Pharmasave
105 Tunica Drive W
Marksville, LA 71351

eSolutions, Inc.
WS #165
P.O. Box 414378
Kansas City, MO 64141

Federal BC/BS of Louisiana
P.O. Box 98028
Baton Rouge, LA 70898-9028

First Choice Medical Supply
P.O. Box 3608
Jackson, MS 39207

Gaillard Pest Control
1303 Choupique Rd.
Plaucheville, LA 71362

Gannett Newspapers of LA
P.O. Box 677326
Dallas, TX 75267-7326

Hanover Insurance Company
P.O. Box 580045
Charlotte, NC 28258-0045

Herndon Jeansonne, MD
P.O. Box 456
Cottonport, LA 71327

Independence Medical
P.O. Box 635864
Cincinnati, OH 45263-5864

InHome Medical Solutions
8500 Baycenter Rd., Ste. 25
Jacksonville, FL 32256

J&J Exterminating
526 MacArthur Drive
Alexandria, LA 71303

Jones Walker, LLP
201 St. Charles Ave.
New Orleans, LA 70170-5100

KAPB-Avoyelles Country
P.O. Box 7
Marksville, LA 71351

LA Dept of Revenue
Withholding Tax
P.O. Box 91017
Baton Rouge, LA 70821-9017

LA Occupational Health Services
P.O. Box 11767
Alexandria, LA 71315-1767

LUBA Worker's Comp
P.O. Box 98082
Baton Rouge, LA 70898-9082

MedExpress Ambulance Service
708 S. Union Street
Opelousas, LA 70570

Medibag Company, Inc.
3607 Ranch Rd. 620 N #20B
Austin, TX 78734

Metoyer Family Medical Center
204 West North Street
Opelousas, LA 70570

Monster Worldwide
P.O. Box 90364
Chicago, IL 60696-0364

Office of U. S. Trustee
300 Fannin St., Suite 3196
Shreveport, LA 71101

Omega Diagnostics LLC
3000 Knight St., Bldg. 5
Suite 220
Shreveport, LA 71105

OnPoint Talk
P.O. Box 495
Cheneyville, LA 71325

Opelousas General Hospital
P.O. Box 1389
Opelousas, LA 70571-1389

Palmetto GBA Government
Finance Department
Attn: AG-215
P.O. Box 100192
Columbia, SC 29202-3192

Polar Air
2941 Hwy 1
Marksville, LA 71351

Precision Dynamics Corporation
4193 Solutions Center
Lockbox #774193
Chicago, IL 60677-4001

Radiology Associates of Opelousa
P.O. Box 9368
Peoria, IL 61612-9368

Rapides Regional Medical Center
P.O. Box 30101
Alexandria, LA 71301-8421

Rapides Senior Citizen Center
Visible Horizon Advertising
209 E. Shamrock Street
Pineville, LA 71360

Ray's Apothecary
3311 Prescott Rd.
Alexandria, LA 71301

Riverland Medical Center
P.O. Box 111
Ferriday, LA 71334-0111

Staples Advantage Dept. ALT
P.O. Box 405386
Atlanta, GA 30384-5386

The ARC of St. Landry /
A Div. of ARC of Iberia
P.O. Box 420
Grand Coteau, LA 70541

The ARC Rapides, Inc.
1700 Ashley Ave.
Alexandria, LA 71301

Thomas E. Price
c/o Andolyn Reeves Johnson
US Attorneys Office
300 Fannin St., Ste 3201
Shreveport, LA 71101-3068

U.S. Attorney's Office
Western District of LA
300 Fannin St., Ste. 3201
Shreveport, LA 71101-3120

United Healthcare
Attn: Johnson & Rountree
P.O. Box 203921
Houston, TX 77216

US Dept of Health and Human Svcs
Chief Counsel
Office of General Counsel
1200 Mail Tower Bldg, Ste 1330
Dallas, TX 75202

Vaughn Automotive
4441 Jackson St. Ext.
Alexandria, LA 71303

ZirMed
1311 Solutions Center
Chicago, IL 60677-1311

**United States Bankruptcy Court
Western District of Louisiana**

In re Central Louisiana Home Healthcare, LLC

Debtor(s)

Case No.

Chapter

11

VERIFICATION OF CREDITOR MATRIX

I, the Member/Manager 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 22, 2017

/s/ Thomas E. Cupples, II

Thomas E. Cupples, II/Member/Manager

Signer/Title

**United States Bankruptcy Court
Western District of Louisiana**

In re Central Louisiana Home Healthcare, LLC
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 Central Louisiana Home Healthcare, LLC 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 22, 2017

Date

/s/ Bradley L. Drell

Bradley L. Drell 24387 - LA

Signature of Attorney or Litigant

Counsel for **Central Louisiana Home Healthcare, LLC**

Gold, Weems, Bruser, Sues & Rundell

POB 6118

Alexandria, LA 71307-6118

(318)445-6471 Fax:(318)445-6476