Jackson, MI 49201

UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF MICHIGAN, SOUTHERN DIVISION

| In re | Lakeshore Fresh Market, Inc. | | _, | | 12 04966 |
|-------|------------------------------|--------|----|----------|----------|
| | | Debtor | | Case No. | 12-04866 |
| | | Deotor | | | |
| | | | | Chapter | 11 |
| | | | | Chablei | |

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).

| (1) | (2) | (3) | (4) | (5) |
|---|---|--|--|---|
| Name of creditor and complete mailing address including zip code | Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted | Nature of claim (trade debt, bank loan, government contract, etc. | Indicate if claim is contingent, unliquidated, disputed or subject to setoff | Amount of claim [if secured also state value of security] |
| Aichigan Commerce Bank OO East Milham OO Box 727 Fortage, MI 49081 | <u> </u> | | | 572,570.14 Collateral FMV 53,032.77 |
| Oon Johnson 479 S. Sprinkle Road Oortage, MI 49002 | | | | 72,043.17 |
| otate of Michigan Department of Creasury PO Box 30199 Lansing, MI 48910 | | | | 23,420.51 Collateral FMV 0.00 |
| Consumers Energy 12 W. Michigan | | | | 10,500.00 |

(3)

Nature of claim

 $(trade\ debt,\ bank$

loan, government

contract, etc.

(4)

 $contingent,\,unliquidated,$

Indicate if

disputed or

subject to setoff

claim is

(5)

Amount of claim

[if secured also

state value of security]

3,000.00

1,851.76

973.21

532.00

| Pro Services 8132 Merchant Place Portage, MI 49002 | 2812 Millcork Street Kalamazoo, MI 49001 Pro Services 8132 Merchant Place Portage, MI 49002 | 8132 Merchant Place Portage, MI 49002 | Kalamazoo Mechanical 5507 East Cork Street Kalamazoo, MI 49048 | | 552 |
|--|--|--|--|---|------|
| Pro Services 973 8132 Merchant Place | 2812 Millcork Street Kalamazoo, MI 49001 Pro Services 8132 Merchant Place | 2812 Millcork Street Kalamazoo, MI 49001 Pro Services 8132 Merchant Place | | | 532 |
| Pro Services 973 | 2812 Millcork Street Kalamazoo, MI 49001 Pro Services | 2812 Millcork Street Kalamazoo, MI 49001 Pro Services | | | |
| Kalamazoo, MI 49001 | 2812 Millcork Street | 2812 Millcork Street | | | 973 |
| | 2812 Millcork Street | 2812 Millcork Street | Kalamazoo, MI 49001 | | |
| Kalamazoo, MI 49009 | | 5995 West C Avenue | Services | • | 3,00 |
| | 3993 West C Avenue | | Management & Tax | 3 | 3,00 |

(2)

Name, telephone number and

employee, agent, or department

of creditor familiar with claim

 $complete\ mailing\ address,$

including zip code, of

who may be contacted

(1)

Name of creditor

 $and\ complete$

mailing address

including zip code