

Fill in this information to identify your case:

United States Bankruptcy Court for the:

WESTERN DISTRICT OF MICHIGAN

Case number *(if known)* _____

Chapter you are filing under:

 Chapter 7 Chapter 11 Chapter 12 Chapter 13 Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

12/15

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 **Rockford Insurance Agency 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) **51-0663964**

4. Debtor's address **Principal place of business**

**3351 Eagle Run Dr. NE
Grand Rapids, MI 49525**

Number, Street, City, State & ZIP Code

Kent

County

Mailing address, if different from principal place of business

P.O. Box, Number, Street, City, State & ZIP Code

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

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(53AB))
- 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. §80a-3)

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.
See <http://www.naics.com/search/>.

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 \$2,490,925 (amount subject to adjustment on 4/01/16 and every three 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 operation, 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	New York Private Insurance Agency, LLC	Relationship to you	Affiliate
District	Western District of Michigan	When	3/01/16
		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 type="checkbox"/> \$100,001 - \$500,000 | <input type="checkbox"/> \$50,000,001 - \$100 million | <input type="checkbox"/> \$10,000,000,001 - \$50 billion |
| <input checked="" 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 type="checkbox"/> \$100,001 - \$500,000 | <input type="checkbox"/> \$50,000,001 - \$100 million | <input type="checkbox"/> \$10,000,000,001 - \$50 billion |
| <input checked="" type="checkbox"/> \$500,001 - \$1 million | <input type="checkbox"/> \$100,000,001 - \$500 million | <input type="checkbox"/> More than \$50 billion |

Request for Relief, Declaration, and Signature

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 March 1, 2016
MM / DD / YYYY

X /s/ Guy L. Hiestand III
Signature of authorized representative of debtor

Title Member

Guy L. Hiestand III
Printed name

18. Signature of attorney

X /s/ Perry G. Pastula
Signature of attorney for debtor

Date **March 1, 2016**
MM / DD / YYYY

Perry G. Pastula
Printed name

Dunn, Schouten & Snoap, P.C.
Firm name

2745 DeHoop Ave. SW
Wyoming, MI 49509
Number, Street, City, State & ZIP Code

Contact phone 616-538-6380 Email address ppastula@dunnsslaw.com

P35588
Bar number and State

Fill in this information to identify the case:

Debtor name **Rockford Insurance Agency LLC**
 United States Bankruptcy Court for the: **WESTERN DISTRICT OF MICHIGAN**
 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
Foley & Lardner LLC 500 Woodward Ave., Ste. 2700 Detroit, MI 48226-3489						\$23,000.00
Glenn S. Morris 6011 W. River Dr. NE Belmont, MI 49306			Contingent Unliquidated Disputed			\$1,378,000.00
Priority Health 1231 East Beltline Ave. NE Grand Rapids, MI 49525-4501		employee health insurance				\$5,382.71
Promenade of Rockford, LLC PO Box 601 Rockford, MI 49341		judgment				\$150,000.00
Vertafore PO BOX 27167 New York, NY 10087						\$5,824.00

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

In re Rockford Insurance Agency LLC

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
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New York Priv. Ins. Agen. 3351 Eagle Run Dr. NE Grand Rapids, MI 49525	Membership	100%	
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New York Private Insurance 3351 Eagle Run Dr. NE Grand Rapids, MI 49525			100% Member
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DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the **Member** 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 March 1, 2016Signature /s/ Guy L. Hiestand III
Guy L. Hiestand III

*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.*

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

In re Rockford Insurance Agency LLC

Debtor(s)

Case No.
Chapter

11

VERIFICATION OF CREDITOR MATRIX

I, the Member 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: March 1, 2016

/s/ Guy L. Hiestand III

Guy L. Hiestand III/Member

Signer/Title

DJT PROPERTIES, LLC
262 S. FREMONT ST.
ROCKFORD MI 49341

FOLEY & LARDNER LLC
500 WOODWARD AVE., STE. 2700
DETROIT MI 48226-3489

FOLEY LARDNER LLC
500 WOODWARD AVE., STE 2700
DETROIT MI 48226-3489

GLENN S. MORRIS
6011 W. RIVER DR. NE
BELMONT MI 49306

GUY L. HIESTAND III
275 SORRENTO DR. SE
BYRON CENTER MI 49315

HC PROPERTIES
3358 EAGLE RUN DR., NE
SUITE 100
GRAND RAPIDS MI 49525

INTERNAL REVENUE SERVICE
CENTRALIZED INSOLVENCY OPERATI
PO BOX 7346
PHILADELPHIA PA 19101-7346

JAMES B. DOEZEMA
FOSTER SWIFT
1700 E. BELTLINE AVE., STE. 20
GRAND RAPIDS MI 49525

MICHIGAN DEPT OF TREASURY
TREASURY BUILDING
LANSING MI 48918

MICHIGAN UNEMPLOYMENT AGENCY
3024 W. GRAND BLVD, SUITE 11-5
DETROIT MI 48202

MORRIS, SCHNOOR & GREMEL PROP
6011 W. RIVER RD. NE
BELMONT MI 49306

PRIORITY HEALTH
1231 EAST BELTLINE AVE. NE
GRAND RAPIDS MI 49525-4501

PROMENADE OF ROCKFORD, LLC
PO BOX 601
ROCKFORD MI 49341

STANLEY J. STEK
MILLER CANFIELD
99 MONROE AVE. NW, STE. 1200
GRAND RAPIDS MI 49503

VERTAFORE
PO BOX 27167
NEW YORK NY 10087

WEST MICHIGAN DOC SHREDDING
PO BOX 459
HUDSONVILLE MI 49426

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

In re Rockford Insurance Agency 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 Rockford Insurance Agency 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:

**New York Priv. Ins. Agen.
3351 Ealge Run Dr. NE
Grand Rapids, MI 49525**

None [*Check if applicable*]

March 1, 2016

Date

/s/ Perry G. Pastula

Perry G. Pastula P35588

Signature of Attorney or Litigant
Counsel for **Rockford Insurance Agency LLC**
Dunn, Schouten & Snoap, P.C.
2745 DeHoop Ave. SW
Wyoming, MI 49509
616-538-6380 Fax:616-538-4414
ppastula@dunnsslaw.com