(Official Form 1) (10/05)								
Easte	Unit ern Dis	ed States B strict of North	ankruptcy A Carolina-W	Court ilson Div	ision		Voluntary Petition	
Name of Debtor (if individual, enter Last, First, Middle): The Meadows of Hermitage, Inc.				Name of	Joint Debtor (S	Spouse) (Last, First	, Middle):	
All Other Names used by the Deb (include married, maiden, and trad	All Other Names used by the Debtor in the last 8 years				All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):			
DBA Bladenboro Assisted		,-		(-,	/	
Last four digits of Soc. Sec /Com	nlete FIN	I or other Tax ID N	• (if more than one, stat	e all) Last fou	r digits of Soc	Sec /Complete FIN	or other Tax ID No. (if more than one, state all)	
35-2173808	_			/				
Street Address of Debtor (No. & S 714 E. Bladen Street Bladenboro, NC	Street, Ci	ty, and State):		Street A	Street Address of Joint Debtor (No. & Street, City, and State):			
Diadolibolo, No			ZIP Code 28320				ZIP Code	
County of Residence or of the Pri Bladen	ncipal Pla	ace of Business:	28320	County	of Residence or	of the Principal Pl	ace of Business:	
Mailing Address of Debtor (if dif		m street address):		Mailing	Address of Join	nt Debtor (if differe	ent from street address):	
117 Village Road NE Suite Leland, NC	e C							
			ZIP Code 28451	_			ZIP Code	
Location of Principal Assets of Br (if different from street address ab		Debtor					· ·	
Type of Debtor (Form of Organi	zation)		of Business				Code Under Which	
(Check one box)	otors)	 (Check all applicable boxes.) Health Care Business Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) Railroad Stockbroker Commodity Broker Clearing Bank 		. Chaj		e Petition is Filed		
Corporation (includes LLC an	d LLP)			d í			Chapter 15 Petition for Recognition of a Foreign Main Proceeding	
 Partnership Other (If debtor is not one of the 	above			🗖 Chaj	oter 9 C	Chapter 12	Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding	
entities, check this box and provid information requested below.)	le the				Chapter	13		
State type of entity:						Nature of Debts (Check one box)	
		□ Nonprofit Organization qualified under 26 U.S.C. § 501(c)(3)		Con:	sumer/Non-Bus		Business	
-	Fee (Che	eck one box)		Check o	ne box:	Chapter 11	Debtors	
 Full Filing Fee attached Filing Fee to be paid in installments (Applicable to individuals only) Must attach signed application for the court's consideration certifying that the debtor 			or Debi	 Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). 				
is unable to pay fee except in ☐ Filing Fee waiver requested (4)				Check if	:			
attach signed application for t	he court's	s consideration. See	Official Form 3B.	or af	filiates are less	oncontingent liqui than \$2 million.	dated debts owed to non-insiders	
Statistical/Administrative Informed Debtor estimates that funds w			* Trawick H. St	,	221 ***		THIS SPACE IS FOR COURT USE ONLY	
 Debtor estimates that, after an available for distribution to un 	y exempt	t property is exclud			paid, there will	be no funds		
Estimated Number of Creditors								
1- 50- 100- 49 99 199	200 999		10,001-10,001-0,00025,000		50,001- OVE 100,000 100,0			
]		
Estimated Assets \$0 to \$50,001 to	\$100,001	to \$500,001 to	\$1,000,001 to	\$10,000,001 to	\$50,000,001 to	More than		
\$50,000 \$100,000	\$500,000		\$10 million	\$50 million	\$100 million	\$100 million		
Estimated Debts	A.C		** ***					
\$0 to \$50,001 to \$50,000 \$100,000	\$100,001 \$500,00		\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	More than \$100 million		

(Official Form	1) (10/05)		FORM B1, Page 2		
Voluntar	y Petition	Name of Debtor(s): The Meadows of Hermitage, Inc.			
(This page mu	st be completed and filed in every case)	The meadows of Hermitage, h	nc.		
		Years (If more than one, attach additional sheet)			
Location Where Filed:	- None -	Case Number:	Date Filed:		
	nding Bankruptcy Case Filed by any Spouse, Partner, or	Affiliate of this Debtor (If more than	n one, attach additional sheet)		
Name of Debt - None -	or:	Case Number:	Date Filed:		
District:		Relationship:	Judge:		
	Exhibit A	Exhibit B (To be completed if debtor is an individual whose debts are primarily consumer debts.)			
forms 10K a pursuant to S and is reques	Aleted if debtor is required to file periodic reports (e.g., nd 10Q) with the Securities and Exchange Commission Section 13 or 15(d) of the Securities Exchange Act of 1934 sting relief under chapter 11.) A is attached and made a part of this petition.	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 delivered to the debtor the notice required by §342(b) of the Bankruptcy Code. X Signature of Attorney for Debtor(s)			
	Exhibit C	Certification Concerning Debt Counseling			
	otor own or have possession of any property that poses or pose a threat of imminent and identifiable harm to public ety?	 by Individual/Joint Debtor(s) I/we have received approved budget and credit counseling during the 180-day period preceding the filing of this petition. 			
☐ Yes, and ■ No	d Exhibit C is attached and made a part of this petition.	☐ I/we request a waiver of the requirement to obtain budget and credit counseling prior to filing based on exigent circumstances. (Must attach certification describing.)			
	Information Regarding the Debt	or (Check the Applicable Boxes)			
	Venue (Check an	y applicable box)			
-	 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. 				
	There is a bankruptcy case concerning debtor's affiliate, ge	eneral partner, or partnership pending	in this District.		
	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 or 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.				
	Statement by a Debtor Who Resides	as a Tenant of Residential Propert	у		
	Check all app	licable boxes.			
	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)				
	Debtor claims that under applicable nonbankruptcy law, the permitted to cure the entire monetary default that gave rise possession was entered, and				
	Debtor has included in this petition the deposit with the co after the filing of the petition.	urt of any rent that would become du	e during the 30-day period		

(Official Form 1) (10/05)	FORM B1, Page 3
Voluntary Petition	Name of Debtor(s):
(This page must be completed and filed in every case)	The Meadows of Hermitage, Inc.
	natures
Signature(s) of Debtor(s) (Individual/Joint)	Signature of a Foreign Representative
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. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by §342(b) of the Bankruptcy Code. I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.	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. (Check only one box.) I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by §1515 of title 11 are attached. Pursuant to §1511 of title 11, United States Code, I request relief in accor- dance 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. Signature of Foreign Representative
X	Printed Name of Foreign Representative
Signature of Debtor	
X	Date
X Signature of Joint Debtor	Signature of Non-Attorney Bankruptcy Petition Preparer
Telephone Number (If not represented by attorney)	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
Date Signature of Attorney	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)
X /s/ Trawick H. Stubbs, Jr. Signature of Attorney for Debtor(s) <u>Trawick H. Stubbs, Jr. 4221</u> Printed Name of Attorney for Debtor(s) <u>Stubbs & Perdue, P.A.</u> Firm Name PO Box 1654 New Bern, NC 28563 Address <u>252-633-2700</u>	 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 19B is attached. Printed Name and title, if any, of Bankruptcy Petition Preparer Social Security number (If the bankrutpcy 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.)
Telephone Number	Address
September 15, 2006	Address
Date	X
Signature of Debtor (Corporation/Partnership) 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. The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition. X /s/ Ronald E. Burrell Signature of Authorized Individual Ronald E. Burrell	Date Signature of Bankruptcy Petition Preparer or officer, principal, responsible person,or partner whose social security number is provided above. 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:
Printed Name of Authorized Individual President Title of Authorized Individual September 15, 2006 Date	If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person. 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.
	5110, 10 0.0.0. 5150.

United States Bankruptcy Court Eastern District of North Carolina-Wilson Division

In re The Meadows of Hermitage, Inc.

Debtor(s)

Case No. Chapter

11

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, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; 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]
NC Dept. of Revenue ATTN: Managing Agent PO Box 25000 Raleigh, NC 27640	NC Dept. of Revenue ATTN: Managing Agent PO Box 25000 Raleigh, NC 27640	Withholding		37,854.41
IFH Attn: Managing Agent PO Drawer 100506 Florence, SC 29501-0506	IFH Attn: Managing Agent PO Drawer 100506 Florence, SC 29501-0506	Trade Debt		5,605.24
Coinmach Corporation Attn: Managing Agent PO Box 27288 New York, NY 10087-7288	Coinmach Corporation Attn: Managing Agent PO Box 27288 New York, NY 10087-7288	Trade Debt		856.00
Grove Medical Attn: Managing Agent 1089 Park West Blvd Greenville, SC 29611	Grove Medical Attn: Managing Agent 1089 Park West Blvd Greenville, SC 29611	Trade Debt		738.48
Edwards Electronic System Attn: Managing Agent PO Box 39 Clayton, NC 27520	Edwards Electronic System Attn: Managing Agent PO Box 39 Clayton, NC 27520	Trade Debt		600.00
Stericycle, Inc. Attn: Manager or Agent PO Box 9001590 Louisville, KY 40290	Stericycle, Inc. Attn: Manager or Agent PO Box 9001590 Louisville, KY 40290	Trade Debt		461.15
Shaw Office Supplies, Inc ATTN: Managing Agent PO Box 2502 Lumberton, NC 28359	Shaw Office Supplies, Inc ATTN: Managing Agent PO Box 2502 Lumberton, NC 28359	Trade Debt		371.72
Roto Rooter Attn: Managing Agent PO Box 669 Fayetteville, NC 28302	Roto Rooter Attn: Managing Agent PO Box 669 Fayetteville, NC 28302	Trade Debt		366.19
Johnson Diversey Attn: Managing Agent PO Box 67000 Detroit, MI 48267-1049	Johnson Diversey Attn: Managing Agent PO Box 67000 Detroit, MI 48267-1049	Trade Debt		253.60

In re The Meadows of Hermitage, Inc.

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS (Continuation Sheet)

Debtor(s)

(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]
Info Quest Attn: Managing Agent PO Box 15521 Surfside Beach, SC 29587	Info Quest Attn: Managing Agent PO Box 15521 Surfside Beach, SC 29587	Trade Debt		55.00
Bladenboro Flower Shop Attn: Managing Agent PO Box 817 Bladenboro, NC 28320	Bladenboro Flower Shop Attn: Managing Agent PO Box 817 Bladenboro, NC 28320	Trade Debt		24.08
Internal Revenue Service PO Box 21126 Philadelphia, PA 19114	Internal Revenue Service PO Box 21126 Philadelphia, PA 19114	Withholding		Unknown

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP

I, the President of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing list and that it is true and correct to the best of my information and belief.

Date September 15, 2006

Signature /s/ Ronald E. Burrell

Ronald E. Burrell President

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

Case No.

VERIFICATION OF CREDITOR MATRIX

I, the President 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:

September 15, 2006

In re The Meadows of Hermitage, Inc.

United States Bankruptcy Court Eastern District of North Carolina-Wilson Division

Debtor(s)

/s/ Ronald E. Burrell

Ronald E. Burrell/President Signer/Title

THE MEADOWS OF HERMITAGE, INC. TRAWICK H. STUBBS, JR. 117 VILLAGE ROAD NE SUITE C LELAND, NC 28451

BRANCH OF REORGANIZATION ATTN: MANAGING AGENT 3475 LENOX ROAD NE #1000 ATLANTA, GA 30326

NC DEPT. OF REVENUE ATTN: MANAGING AGENT PO BOX 25000 RALEIGH, NC 27640

COINMACH CORPORATION ATTN: MANAGING AGENT PO BOX 27288 NEW YORK, NY 10087-7288

IFH

ATTN: MANAGING AGENT PO DRAWER 100506 FLORENCE, SC 29501-0506

ROTO ROOTER ATTN: MANAGING AGENT PO BOX 669 FAYETTEVILLE, NC 28302

STUBBS & PERDUE, P.A. PO BOX 1654 NEW BERN, NC 28563

INTERNAL REVENUE SERVICE PO BOX 21126 PHILADELPHIA, PA 19114

UNITED STATES ATTORNEY 310 NEW BERN AVENUE FEDERAL BLDG SUITE 800 RALEIGH, NC 27601-1461

EDWARDS ELECTRONIC SYSTEM ATTN: MANAGING AGENT PO BOX 39 CLAYTON, NC 27520

INFO QUEST ATTN: MANAGING AGENT PO BOX 15521 SURFSIDE BEACH, SC 29587

SHAW OFFICE SUPPLIES, INC ATTN: MANAGING AGENT PO BOX 2502 LUMBERTON, NC 28359

SECRETARY OF TREASURY ATTN: MANAGING AGENT 1500 PENNSYLVANIA AVE NW WASHINGTON, DC 20220

EMPLOYMENT SECURITY COM. ATTN: MANAGING AGENT PO BOX 25903 RALEIGH, NC 27611

BLADENBORO FLOWER SHOP ATTN: MANAGING AGENT PO BOX 817 **BLADENBORO, NC 28320**

GROVE MEDICAL ATTN: MANAGING AGENT 1089 PARK WEST BLVD GREENVILLE, SC 29611

JOHNSON DIVERSEY ATTN: MANAGING AGENT PO BOX 67000 DETROIT, MI 48267-1049

STERICYCLE, INC. ATTN: MANAGER OR AGENT PO BOX 9001590 LOUISVILLE, KY 40290