

UNITED STATES BANKRUPTCY COURT
MIDDLE DISTRICT OF FLORIDA
TAMPA DIVISION

IN RE:	}	CASE NUMBER
	}	8:11-bk-02801-CED
ROBB & STUCKY LIMITED LLLP,	}	
	}	JUDGE DELANO
	}	
DEBTOR.	}	CHAPTER 11

DEBTOR'S STANDARD MONTHLY OPERATING REPORT (BUSINESS)

FOR THE PERIOD
FROM 09/01/11 TO 09/30/11

Comes now the above-named debtor and files its Monthly Operating Reports in accordance with the Guidelines established by the United States Trustee and FRBP 2015.

/s/ Jordi Guso
Attorney for Debtor's Signature

Debtor's Address
and Phone Number:

8695 College Parkway, Ste 2230
Fort Myers, FL 33919
239.437.7997 239.985.4180

Attorney's Address
and Phone Number:

Berger Singerman, P.A.
200 S. Biscayne Boulevard Boulevard, #1000
Miami, FL 33131
(305) 755-9500

Note: The original Monthly Operating Report is to be filed with the court and a copy simultaneously provided to the United States Trustee Office. Monthly Operating Reports must be filed by the 20th day of the following month.

For assistance in preparing the Monthly Operating Report, refer to the following resources on the United States Trustee Program Website, http://www.usdoj.gov/ust/r21/reg_info.htm

- 1) Instructions for Preparations of Debtor's Chapter 11 Monthly Operating Report
- 2) Initial Filing Requirements
- 3) Frequently Asked Questions (FAQs) <http://www.usdoj.gov/ust/>

**SCHEDULE OF RECEIPTS AND DISBURSEMENTS
FOR THE PERIOD BEGINNING 09/01/11 AND ENDING 09/30/11**

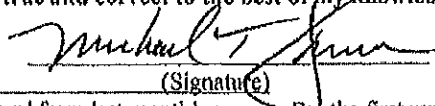
Name of Debtor: Robb & Stucky Limited, LLLP
Date of Petition: 02/18/11

Case Number 8:11-bk-02801-CED

	<u>CURRENT MONTH</u>	<u>CUMULATIVE PETITION TO DATE</u>
1. FUNDS AT BEGINNING OF PERIOD	<u>5,744,901 (a)</u>	<u>(297,673) (b)</u>
2. RECEIPTS:		
A. Cash Sales	<u> </u>	<u> </u>
Minus: Cash Refunds	<u> </u>	<u> </u>
Net Cash Sales	<u> </u>	<u> </u>
B. Accounts Receivable	<u>107,595</u>	<u>2,473,697</u>
C. Other Receipts (See MOR-3)	<u>3,649</u>	<u>54,819,870</u>
(If you receive rental income, you must attach a rent roll.)		
3. TOTAL RECEIPTS (Lines 2A+2B+2C)	<u>111,244</u>	<u>57,293,567</u>
4. TOTAL FUNDS AVAILABLE FOR OPERATIONS (Line 1 + Line 3)	<u>5,856,145</u>	<u>56,995,894</u>
5. DISBURSEMENTS		
A. Advertising	<u>-</u>	<u>47,923</u>
B. Bank Charges	<u>29,888</u>	<u>1,028,718</u>
C. Contract Labor	<u>24,087</u>	<u>1,128,346</u>
D. Fixed Asset Payments (not incl. in "N")	<u>-</u>	<u>-</u>
E. Insurance	<u>-</u>	<u>986,633</u>
F. Inventory Payments (See Attach. 2)	<u>-</u>	<u>145,425</u>
G. Leases	<u>-</u>	<u>3,468</u>
H. Manufacturing Supplies	<u>-</u>	<u>10,859</u>
I. Office Supplies	<u>-</u>	<u>30,076</u>
J. Payroll - Net (See Attachment 4B)	<u>-</u>	<u>5,855,471</u>
K. Professional Fees (Accounting & Legal)	<u>233,375</u>	<u>3,337,884</u>
L. Rent	<u>-</u>	<u>5,564,444</u>
M. Repairs & Maintenance	<u>-</u>	<u>43,188</u>
N. Secured Creditor Payments (See Attach. 2)	<u>-</u>	<u>21,868,946</u>
O. Taxes Paid - Payroll (See Attachment 4C)	<u>-</u>	<u>2,037,285</u>
P. Taxes Paid - Sales & Use (See Attachment 4C)	<u>-</u>	<u>5,387,251</u>
Q. Taxes Paid - Other (See Attachment 4C)	<u>-</u>	<u>10,714</u>
R. Telephone	<u>-</u>	<u>162,899</u>
S. Travel & Entertainment	<u>-</u>	<u>5,546</u>
Y. U.S. Trustee Quarterly Fees	<u>-</u>	<u>50,000</u>
U. Utilities	<u>12,895</u>	<u>620,732</u>
V. Vehicle Expenses	<u>490</u>	<u>274,317</u>
W. Other Operating Expenses (See MOR-3)	<u>19,353</u>	<u>2,859,711</u>
6. TOTAL DISBURSEMENTS (Sum of 5A thru W)	<u>320,087</u>	<u>51,459,836</u>
7. ENDING BALANCE (Line 4 Minus Line 6)	<u>5,536,058 (c)</u>	<u>5,536,058 (c)</u>

I declare under penalty of perjury that this statement and the accompanying documents and reports are true and correct to the best of my knowledge and belief.

This 20th day of October 2011


(Signature)

(a) This number is carried forward from last month's report. For the first report only, this number will be the balance as of the petition date.

(b) This figure will not change from month to month. It is always the amount of funds on hand as of the date of the petition.

(c) These two amounts will always be the same if form is completed correctly.

MONTHLY SCHEDULE OF RECEIPTS AND DISBURSEMENTS (cont'd)

Detail of Other Receipts and Other Disbursements

OTHER RECEIPTS:

Describe Each Item of Other Receipt and List Amount of Receipt. Write totals on Page MOR-2, Line 2C.

<u>Description</u>	<u>Current Month</u>	<u>Cumulative Petition to Date</u>
United Health Care	\$ 14	\$ 54,819,870
Pitney Bowes Refund	1,007	
Misc Utility Refunds	2,628	
TOTAL OTHER RECEIPTS	\$ 3,649	\$ 54,819,870

"Other Receipts" includes Loans from Insiders and other sources (i.e. Officer/Owner, related parties directors, related corporations, etc.). Please describe below:

<u>Loan Amount</u>	<u>Source of Funds</u>	<u>Purpose</u>	<u>Repayment Schedule</u>

OTHER DISBURSEMENTS:

Describe Each Item of Other Disbursement and List Amount of Disbursement. Write totals on Page MOR-2, Line 5W.

<u>Description</u>	<u>Current Month</u>	<u>Cumulative Petition to Date</u>
Refer to Schedule 5A for Other Disbursements	19,353	\$ 2,859,710
TOTAL OTHER DISBURSEMENTS	\$ 19,353	\$ 2,859,710

NOTE: Attach a current Balance Sheet and Income (Profit & Loss) Statement.

Robb & Stucky Limited, LLLP
 Reporting Period 09/01/11 - 09/30/11
 Case # 8:11-bk-02801
 Preliminary Balance Sheet
 (\$000) September 30, 2011

	SEPTEMBER
<u>ASSETS</u>	
Cash	\$ 5,536
Accounts Receivable, net	220
Inventory	-
Fixed Assets	-
Misc and other assets	4,556
TOTAL ASSETS	\$ 10,312
<u>LIABILITIES & CAPITAL</u>	
Accounts payable	\$ -
Accrued expenses	750
Notes payable	-
Subordinated debt	17,000
Liabilities Subject to Compromise	58,106
Partners' capital (deficit)	(65,274)
Net Income/(loss) (September 2011)	(269)
TOTAL LIABILITIES & CAPITAL	\$ 10,312

Robb & Stucky Limited, LLLP
Reporting Period 09/01/11 - 09/30/11
Case # 8:11-bk-02801
Preliminary Income Statement (In \$000)
Periods ended September 30, 2011

	<u>SEPTEMBER</u>	<u>Petiton (2/18) To Date</u> <u>SEPTEMBER</u>
Net retail sales	\$ -	\$ 12,408
Cost of goods sold	0	7,014
Gross profit	-	5,394
Other Income	0	65
Total Income	-	5,459
Payroll (net)	0	7,793
Payroll Taxes (net)	0	607
Rent	2	5,633
Professional Fees	271	4,365
Other Non-Payroll expenses	(4)	3,652
Liquidator reimbursements	0	(15,484)
Total operating expenses	269	6,566
EBITDA	(269)	(1,107)
Non-operating (income) expense		
(Gain)/Loss on disposal of Fixed Assets	0	22,103
Adjust property tax accrual	0	748
Depreciation & amortization	0	121
Loss on Inventory sale to liquidator	0	12,563
Write off of Bad Debts	0	3,866
Interest expense	0	477
Gain debt exting/ restructure, net	0	0
Management equity amortization	-	-
Total non-operating (income)/ exp	-	39,878
Net Income / (loss)	<u>\$ (269)</u>	<u>\$ (40,985)</u>

ATTACHMENT 1

MONTHLY ACCOUNTS RECEIVABLE RECONCILIATION AND AGING

Name of Debtor: Robb & Stucky Limited, LLLP Case Number: 8:11-bk-02801-CED

Reporting Period beginning 09/01/11 Period ending 09/30/11

ACCOUNTS RECEIVABLE AT PETITION DATE: \$8,028,012

ACCOUNTS RECEIVABLE RECONCILIATION

(Include all accounts receivable, pre-petition and post-petition, including charge card sales which have not been received):

Beginning of Month Balance	\$ 300,000	
PLUS: Current Month New Billings		
MINUS: Collection During the Month	(80,000)	
PLUS/MINUS: Adjustments or Write-offs	\$	*
End of Month Balance	\$ 220,000	(c)

*For any adjustments or Write-offs provide explanation and supporting documentation, if applicable:

POST PETITION ACCOUNTS RECEIVABLE AGING

(Show the total for each aging category for all accounts receivable)

0-30 Days	31-60 Days	61-90 Days	Over 90Days	Total
\$ 180,000	\$ 0	\$ 0	\$ 40,000	220,000 (c)

For any receivables in the "Over 90 Days" category, please provide the following:

<u>Customer</u>	<u>Receivable Date</u>	<u>Status</u> (Collection efforts taken, estimate of collectability, Write-off, disputed account, etc.)
<u>Other</u>	<u>Various</u>	<u>Collectable</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

(a) This number is carried forward from last month's report. For the first report only, this number will be the balance as of the petition date.

(b) This must equal the number reported in the "Current Month" column of Schedule of Receipts and Disbursements (Page MOR-2, Line 2B).

(c) These two amounts must equal.

Robb & Stucky Limited, LLLP
Reporting Period 09/01/11 - 09/30/11
Case # 8:11-bk-02801
AR AGING 093011

	Current	30 +	60+	Over 90	Total
Cullum Homes	120,000.00				120,000.00
Stock Development	60,000.00				60,000.00
					0.00
Other				40,000.00	40,000.00
Total	\$180,000.00	\$ -	\$ -	\$ 40,000.00	\$ 220,000.00

**ATTACHMENT 2
MONTHLY ACCOUNTS PAYABLE AND SECURED PAYMENTS REPORT**

Name of Debtor: Robb & Stucky Limited, LLLP Case Number: 8:11-bk-02801-CED

Reporting Period beginning 09/01/11 Period ending 09/30/11

In the space below list all invoices or bills incurred and not paid since the filing of the petition. Do not include amounts owed prior to filing the petition. In the alternative, a computer generated list of payables may be attached provided all information requested below is included.

POST-PETITION ACCOUNTS PAYABLE

<u>Date Incurred</u>	<u>Days Outstanding</u>	<u>Vendor</u>	<u>Description</u>	<u>Amount</u>
			<u>See attached schedule of Post-Petition Accounts Payable</u>	
TOTAL AMOUNT				<u>\$ 463,465 (b)</u>

Check here if pre-petition debts have been paid. Attach an explanation and copies of supporting documentation.

ACCOUNTS PAYABLE RECONCILIATION (Post Petition Unsecured Debt Only)

Opening Balance	\$ 371,961 (a)
PLUS: New Indebtedness Incurred This Month	<u>137,831</u>
MINUS: Amount Paid on Post Petition, Accounts Payable This Month	<u>46,327</u>
PLUS/MINUS: Adjustments	<u>0 *</u>
Ending Month Balance	\$ <u>463,465 (c)</u>

*For any adjustments provide explanation and supporting documentation, if applicable.

SECURED PAYMENTS REPORT

List the status of Payments to Secured Creditors and Lessors (Post Petition Only). If you have entered into a modification agreement with a secured creditor/lessor, consult with your attorney and the United States Trustee Program prior to completing this section).

<u>Secured Creditor/ Lessor</u>	<u>Date Payment Due This Month</u>	<u>Amount Paid This Month</u>	<u>Number of Post Petition Payments Delinquent</u>	<u>Total Amount of Post Petition Payments Delinquent</u>
<u>None</u>				
TOTAL				<u>(d)</u>

(a) This number is carried forward from last month's report. For the first report only, this number will be zero.
 (b, c) The total of line (b) must equal line (c).
 (d) This number is reported in the "Current Month" column of Schedule of Receipts and Disbursements (Page MOR-2, Line 5N).

**Robb Stucky Limited LLLP
Accounts Payable Reconciliation**

Robb & Stucky Limited, LLLP	
Reporting Period 09/01/11 - 09/30/11	
Case # 8:11-bk-02801	
Attachment: Outstanding AP Reconciliation 09/30/11	
CLAIMANT NAME AND ADDRESS	VALID AMOUNT OF CLAIM TO BE ALLOWED AS ADMINISTRATIVE CLAIM PER COMPANY
Carter-Pritchett Advertising, Inc. *	\$11,228.00
Heirloom Rug Gallery, Ltd. *	\$116,500.00
Karastan Bigelow	\$12,881.98
Statecraft International, Inc.	\$50,946.00
Telescope Casual Furniture, Inc.	\$5,409.18
Lexington Home Brands	\$5,372.52
Tampa Westshore Associates, L.P.	\$0.00
TSLV, LLC (Town Square, Las Vegas)	\$185,000.00
Michigan Homes, Inc.	\$28,789.00
General Electric Capital Corporation	\$28,363.00
Gerald T. Greenwood	\$358.90
Polly Richardson-Luby	\$818.15
Lynn Ann Cheever	\$1,485.60
Carol A. Steed	\$553.37
Judith A. Colgan	\$422.38
Mary Beth Grant	\$1,220.98
Mark D. Hess	\$2,542.33
Tracy Ann Hickey-Wiedel	\$1,007.75
Grace Evasco	\$166.24
US Trustees	\$10,400.00
	\$463,465.38

**ATTACHMENT 3
INVENTORY AND FIXED ASSETS REPORT**

Name of Debtor: Robb & Stucky Limited, LLLP Case Number: 8:11-bk-02801-CED

Reporting Period beginning 09/01/11 Period ending 09/30/11

INVENTORY REPORT

INVENTORY BALANCE AT PETITION DATE: \$ 47,640,843
 INVENTORY RECONCILIATION:
 Inventory Balance at Beginning of Month \$ 0
 PLUS: Inventory Purchased During Month \$ 0
 MINUS: Inventory Used or Sold \$ 0
 PLUS/MINUS: Adjustments or Write-downs \$ 0
 Inventory on Hand at End of Month \$ 0

METHOD OF COSTING INVENTORY: UCF cost

*For any adjustments or write-downs provide explanation and supporting documentation, if applicable.

INVENTORY AGING					Total Inventory
Less than 6 months old	6 months to 2 years old	Greater than 2 years old	Considered Obsolete		
_____ %	_____ %	_____ %	_____ %	=	<u>100%*</u>

* Aging Percentages must equal 100%.

Check here if inventory contains perishable items.

Description of Obsolete Inventory: n/a

FIXED ASSET REPORT

FIXED ASSETS FAIR MARKET VALUE AT PETITION DATE: \$22,556,436 (b)

(Includes Property, Plant and Equipment)

BRIEF DESCRIPTION (First Report Only): Buildings, Leasehold Improvements, Furniture & Fixtures, Vehicles, Warehouse Equipment

FIXED ASSETS RECONCILIATION:
 Fixed Asset Book Value at Beginning of Month \$ 0
 MINUS: Depreciation Expense \$ 0
 PLUS: New Purchases \$ 0
 PLUS/MINUS: Adjustments or Write-downs \$ 0
 Ending Monthly Balance \$ 0

*For any adjustments or write-downs, provide explanation and supporting documentation, if applicable.

BRIEF DESCRIPTION OF FIXED ASSETS PURCHASED OR DISPOSED OF DURING THE REPORTING PERIOD: _____

(a) This number is carried forward from last month's report. For the first report only, this number will be the balance as of the petition date.

(b) Fair Market Value is the amount at which fixed assets could be sold under current economic conditions. Book Value is the cost of the fixed assets minus accumulated depreciation and other adjustments.

ATTACHMENT 4A

MONTHLY SUMMARY OF BANK ACTIVITY - OPERATING ACCOUNT

Name of Debtor: Robb & Stucky Limited, LLLP Case Number: 8:11-bk-02801-CED

Reporting Period beginning 09/01/11 Period ending 09/30/11

Attach a copy of current month bank statement and bank reconciliation to this Summary of Bank Activity. A standard bank reconciliation form can be found at http://www.usdoj.gov/ust/r21/reg_info.htm. If bank accounts other than the three required by the United States Trustee Program are necessary, permission must be obtained from the United States Trustee prior to opening the accounts. Additionally, use of less than the three required bank accounts must be approved by the United States Trustee.

NAME OF BANK: Bank of America BRANCH: _____

ACCOUNT NAME: _____ ACCOUNT NUMBER: _____

PURPOSE OF ACCOUNT: OPERATING

Ending Balance per Bank Statement	\$	_____
Plus Total Amount of Outstanding Deposits	\$	_____
Minus Total Amount of Outstanding Checks and other debits	\$	_____*
Minus Service Charges	\$	_____
Ending Balance per Check Register	\$	<u>5,536,058</u> ** (a)

*Debit cards are used by _____

**If Closing Balance is negative, provide explanation: See attached bank reconciliations

The following disbursements were paid in Cash (do not include items reported as Petty Cash on Attachment 4D: Check here if cash disbursements were authorized by United States Trustee)

Date	Amount	Payee	Purpose	Reason for Cash Disbursement
_____	_____	_____	_____	<u>None</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

TRANSFERS BETWEEN DEBTOR IN POSSESSION ACCOUNTS

"Total Amount of Outstanding Checks and other debits", listed above, includes:

\$	<u>n/a</u>	Transferred to Payroll Account
\$	<u>n/a</u>	Transferred to Tax Account

(a) The total of this line on Attachment 4A, 4B and 4C plus the total of 4D must equal the amount reported as "Ending Balance" on Schedule of Receipts and Disbursements (Page MOR-2, Line 7).

Robb & Stucky Limited, LLLP
Reporting Period 09/01/11 - 09/30/11
Case # 8:11-bk-02801

Attachment 4A: Summary

	Beg	End
Operating Master	-	-
Depository	13,741	0
Controlled Disbursement	39,649	55,570
DIP Loan / Cash Collateral	5,691,511	5,480,488
Cash	<u>5,744,901</u>	<u>5,536,058</u>

Details to Cash above

Attachment 4A: Operating Master

Ending Bal per Bank Statement 08/31/11	0
Plus Advances from ABL	292,823
Minus Disbursements (Checks, ACHs, Wires)	292,823
Minus Service Charges	0
Ending balance per check register 09/30/11	<u>0</u>

Attachment 4A: Depository

Ending Bal per Bank Statement 08/31/11	13,741
Plus Total Amount of Deposits	95,323
Minus Total Amount Transferred to DIP Loan	109,065
Minus Service Charges	0
Ending balance per check register 09/30/11	<u>0</u>

Attachment 4A: Controlled Disbursements

Ending balance per check register	39,649
Plus Total Amount of Checks Issued (less Voids)	90,897
Plus Total Amount of ACH's Advanced	8
Minus Total Amount of Cleared Checks	74,976
Minus Wires Cleared	9
Ending balance per check register 09/30/11	<u>55,570</u>

Attachment 4A: DIP Loan / Cash Collateral

Ending Bal 08/31/11	5,691,511
Plus: Hudson Settlements	0
Plus: Deposits	109,065
Plus: Misc Paydowns	0
Plus: LC Cash Collateral	0
Minus: Disbursements	290,200
Minus: Bank Fees	29,888
Minus:	0
Ending balance per check register 09/30/11	<u>5,480,488</u>

Escrow Accounts (not included in Cash - Item 7)

	Beg	End
NAB Escrow	2,921,847	2,922,425
Utilities Escrow	125,000	125,000
R&S Incentive Escrow	118,461	15,897
Rolling Stock Escrow	-	269,792
Total Escrow	<u>3,165,308</u>	<u>3,333,114</u>

Total Cash + Escrow Accts

8,910,209	8,869,172
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ATTACHMENT 5A

CHECK REGISTER - OPERATING ACCOUNT

Name of Debtor: Robb & Stucky Limited, LLLP Case Number: 8:11-bk-02801-CED

Reporting Period beginning 09/01/11 Period ending 09/30/11

NAME OF BANK: Bank of America BRANCH: _____

ACCOUNT NAME: _____

ACCOUNT NUMBER: _____

PURPOSE OF ACCOUNT: OPERATING

Account for all disbursements, including voids, lost checks, stop payments, etc. In the alternative, a computer generated check register can be attached to this report, provided all the information requested below is included.

<u>DATE</u>	<u>CHECK NUMBER</u>	<u>PAYEE</u>	<u>PURPOSE</u>	<u>AMOUNT</u>
			<u>See attached schedule of disbursements</u>	
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
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_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
TOTAL				<u>\$ 320,087</u>

Robb & Stucky Limited, LLLP
 Reporting Period 09/01/11 to 09/30/11
 Case # 8:11-bk-02801

5A: Disbursements

Date Issued	R & S Check #	Payee Vendor #	Vendor Name	Purpose	Check Total
Checks					
09/09/11	529952	N322	POLLY RICHARDSON-LUBY	ACCOUNTING/LEGAL	687.50
09/09/11	529953	G983	CERIDIAN	EMPLOYEE RELATED-OTHER	205.00
09/09/11	529953	G983	CERIDIAN	EMPLOYEE RELATED-OTHER	8.20
09/09/11	529953	G983	CERIDIAN	EMPLOYEE RELATED-OTHER	42.00
09/09/11	529954	K006	UNITEDHEALTHCARE	ACCR HEALTH-UHC-2004	12,827.34
09/09/11	529954	K006	UNITEDHEALTHCARE	EMPLOYEE RELATED-OTHER	92.54
09/09/11	529955	Q586	DON RIEGELS	ACCOUNTING/LEGAL	2,100.00
09/09/11	529956	U724	MARK HESS	ACCOUNTING/LEGAL	1,192.50
09/09/11	529957	U727	BRENT BELBECK	ACCOUNTING/LEGAL	900.00
09/09/11	529958	U729	CHERYL BOISCLAIR	ACCOUNTING/LEGAL	2,495.63
09/09/11	529959	U730	MIKE T SKIDD PA	ACCOUNTING/LEGAL	1,000.00
09/09/11	529960	U732	KIM CUMMINGS	ACCOUNTING/LEGAL	2,828.75
09/09/11	529961	U724	MARK HESS	ACCOUNTING/LEGAL	1,350.00
09/09/11	529962	U731	BECKY HESS	ACCOUNTING/LEGAL	187.50
09/23/11	529963	N322	POLLY RICHARDSON-LUBY	ACCOUNTING/LEGAL	500.00
09/23/11	529964	E238	LARSON ALLEN LLP	ACCOUNTING/LEGAL	18,374.81
09/23/11	529965	G983	CERIDIAN	EMPLOYEE RELATED-OTHER	325.00
09/23/11	529966	H598	RUTHERFORD ELECTRIC	ACCOUNTING/LEGAL	12,895.00
09/23/11	529967	U724	MARK HESS	ACCOUNTING/LEGAL	382.50
09/23/11	529968	U727	BRENT BELBECK	ACCOUNTING/LEGAL	2,512.50
09/23/11	529969	U729	CHERYL BOISCLAIR	ACCOUNTING/LEGAL	3,300.00
09/23/11	529970	U730	MIKE T SKIDD PA	ACCOUNTING/LEGAL	1,000.00
09/23/11	529971	U732	KIM CUMMINGS	ACCOUNTING/LEGAL	3,650.00
09/23/11	529972	E238	LARSON ALLEN LLP	ACCOUNTING/LEGAL	20,000.00
09/30/11	529973	U717	ATRIUM OF SW FLORIDA, INC	RENT BASE	1,550.87
09/30/11	529974		AMERICAN FLEET & LEASE	ACCOUNTING/LEGAL	489.60

Check Total 90,897.24

ACH & Wires

09/01/11	905928	U386	BERGER SINGERMAN, P.A.	ACCOUNTING/LEGAL	35,000.00
09/07/11	905929	U386	BERGER SINGERMAN, P.A.	ACCOUNTING/LEGAL	20,000.00
09/07/11	905930	K006	UNITEDHEALTHCARE	ACCR HEALTH-UHC-2004	247.25
09/07/11	905931	U386	BERGER SINGERMAN, P.A.	ACCOUNTING/LEGAL	20,000.00
09/08/11	905932	K006	UNITEDHEALTHCARE	ACCR HEALTH-UHC-2004	1,111.96
09/08/11	14915	T414	MEDCO HEALTH SOLUTIONS	ACCR HEALTH-UHC-2004	8.35
09/13/11	905933	U386	BERGER SINGERMAN, P.A.	ACCOUNTING/LEGAL	20,000.00
09/13/11	905934	U386	BERGER SINGERMAN, P.A.	ACCOUNTING/LEGAL	20,000.00
09/15/11	905935	K006	UNITEDHEALTHCARE	ACCR HEALTH-UHC-2004	406.71
09/21/11	905936	U386	BERGER SINGERMAN, P.A.	ACCOUNTING/LEGAL	20,000.00
09/21/11	905937	U386	BERGER SINGERMAN, P.A.	ACCOUNTING/LEGAL	20,000.00
09/22/11	905938	K006	UNITEDHEALTHCARE	ACCR HEALTH-UHC-2004	2,010.88
09/28/11	905939	U386	BERGER SINGERMAN, P.A.	ACCOUNTING/LEGAL	20,000.00
09/28/11	905940	U386	BERGER SINGERMAN, P.A.	ACCOUNTING/LEGAL	20,000.00
09/30/11	905941	K006	UNITEDHEALTHCARE	ACCR HEALTH-UHC-2004	617.31

Wires & ACH 199,302.46

Bank Fees 29,888.00

TOTAL 320,087.70

ATTACHMENT 4B

MONTHLY SUMMARY OF BANK ACTIVITY - PAYROLL ACCOUNT

Name of Debtor: Robb & Stucky Limited, LLLP Case Number: 8:11-bk-02801-CED

Reporting Period beginning 09/01/11 Period ending 09/30/11

Attach a copy of current month bank statement and bank reconciliation to this Summary of Bank Activity. A standard bank reconciliation form can be found at http://www.usdoj.gov/ust/r21/reg_info.htm, <http://www.usdoj.gov/ust/>

NAME OF BANK: N/A BRANCH: _____

ACCOUNT NAME: _____ ACCOUNT NUMBER: _____

PURPOSE OF ACCOUNT: PAYROLL

Ending Balance per Bank Statement	\$ _____
Plus Total Amount of Outstanding Deposits	\$ _____
Minus Total Amount of Outstanding Checks and other debits	\$ _____*
Minus Service Charges	\$ _____
Ending Balance per Check Register	\$ _____**(a)

*Debit cards must not be issued on this account.

**If Closing Balance is negative, provide explanation: _____

The following disbursements were paid by Cash: (Check here if cash disbursements were authorized by United States Trustee)

Date	Amount	Payee	Purpose	Reason for Cash Disbursement
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

The following non-payroll disbursements were made from this account:

Date	Amount	Payee	Purpose	Reason for disbursement from this account
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

(a)The total of this line on Attachment 4A, 4B and 4C plus the total of 4D must equal the amount reported as "Ending Balance" on Schedule of Receipts and Disbursements (Page MOR-2, Line 7).

ATTACHMENT 5B
CHECK REGISTER - PAYROLL ACCOUNT

Name of Debtor: Robb & Stucky Limited, LLLP Case Number: 8:11-bk-02801-CED

Reporting Period beginning 09/01/11 Period ending 09/30/11

NAME OF BANK: _____ BRANCH: _____

ACCOUNT NAME: No separate payroll account

ACCOUNT NUMBER: _____

PURPOSE OF ACCOUNT: PAYROLL

Account for all disbursements, including voids, lost payments, stop payment, etc. In the alternative, a computer generated check register can be attached to this report, provided all the information requested below is included.

<u>DATE</u>	<u>CHECK NUMBER</u>	<u>PAYEE</u>	<u>PURPOSE</u>	<u>AMOUNT</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
		TOTAL		\$ _____

ATTACHMENT 4C

MONTHLY SUMMARY OF BANK ACTIVITY - TAX ACCOUNT

Name of Debtor: Robb & Stucky Limited, LLLP Case Number: 8:11-bk-02801-CED

Reporting Period beginning 09/01/11 Period ending 09/30/11

Attach a copy of current month bank statement and bank reconciliation to this Summary of Bank Activity. A standard bank reconciliation form can be found on the United States Trustee website, <http://www.usdoj.gov/ust/21/index.htm>.

NAME OF BANK: No separate tax account BRANCH: _____

ACCOUNT NAME: none ACCOUNT NUMBER: _____

PURPOSE OF ACCOUNT: TAX

Ending Balance per Bank Statement	\$	_____
Plus Total Amount of Outstanding Deposits	\$	_____
Minus Total Amount of Outstanding Checks and other debits	\$	_____*
Minus Service Charges	\$	_____
Ending Balance per Check Register	\$	_____**(a)

*Debit cards must not be issued on this account.

**If Closing Balance is negative, provide explanation: _____

The following disbursements were paid by Cash: (Check here if cash disbursements were authorized by United States Trustee)

Date	Amount	Payee	Purpose	Reason for Cash Disbursement
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

The following non-tax disbursements were made from this account:

Date	Amount	Payee	Purpose	Reason for disbursement from this account
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

(a)The total of this line on Attachment 4A, 4B and 4C plus the total of 4D must equal the amount reported as "Ending Balance" on Schedule of Receipts and Disbursements (Page MOR-2, Line 7).

ATTACHMENT 5C

CHECK REGISTER - TAX ACCOUNT

Name of Debtor: Robb & Stucky Limited, LLLP Case Number: 8:11-bk-02801-CED

Reporting Period beginning 09/01/11 Period ending 09/30/11

NAME OF BANK: _____ BRANCH: _____

ACCOUNT NAME: _____ ACCOUNT # _____

PURPOSE OF ACCOUNT: TAX

Account for all disbursements, including voids, lost checks, stop payments, etc. In the alternative, a computer-generated check register can be attached to this report, provided all the information requested below is included.

<http://www.usdoj.gov/ust/>

CHECK				
<u>DATE</u>	<u>NUMBER</u>	<u>PAYEE</u>	<u>PURPOSE</u>	<u>AMOUNT</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

TOTAL _____(d)

SUMMARY OF TAXES PAID

Payroll Taxes Paid	\$ _____(a)
Sales & Use Taxes Paid	_____ (b)
Other Taxes Paid	_____ (c)
TOTAL	\$ _____(d)

- (a) This number is reported in the "Current Month" column of Schedule of Receipts and Disbursements (Page MOR-2, Line 5O).
- (b) This number is reported in the "Current Month" column of Schedule or Receipts and Disbursements (Page MOR-2, Line 5P).
- (c) This number is reported in the "Current Month" column of Schedule of Receipts and Disbursements (Page MOR-2, Line 5Q).
- (d) These two lines must be equal.

ATTACHMENT 4D

INVESTMENT ACCOUNTS AND PETTY CASH REPORT

INVESTMENT ACCOUNTS

Each savings and investment account, i.e. certificates of deposits, money market accounts, stocks and bonds, etc., should be listed separately. Attach copies of account statements.

Type of Negotiable Nil	Face Value	Purchase Price	Date of Purchase	Current Market Value
Instrument				
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
TOTAL				<u>0</u> (n)

PETTY CASH REPORT

The following Petty Cash Drawers/Accounts are maintained:

Location of Box/Account	(Column 2) Maximum Amount of Cash in Drawer/Acct.	(Column 3) Amount of Petty Cash On Hand (Column 2) and At End of Month	(Column 4) Difference between (Column 2) and (Column 3)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
TOTAL		\$ <u>0</u> (b)	

For any Petty Cash Disbursements over \$100 per transaction, attach copies of receipts. If there are no receipts, provide an explanation _____

TOTAL INVESTMENT ACCOUNTS AND PETTY CASH(a + b) \$ 0 (c)

(c)The total of this line on Attachment 4A, 4B and 4C plus the total of 4D must equal the amount reported as "Ending Balance" on Schedule of Receipts and Disbursements (Page MOR-2, Line 7).

ATTACHMENT 6

MONTHLY TAX REPORT

Name of Debtor: Robb & Stucky Limited, LLLP Case Number: 8:11-bk-02801-CED

Reporting Period beginning 09/01/11 Period ending 09/30/11

TAXES OWED AND DUE

Report all unpaid post-petition taxes including Federal and State withholding FICA, State sales tax, property tax, unemployment tax, State workmen's compensation, etc.

Name of Taxing Authority	Date Payment Due	Description	Amount	Date Last Tax Return Filed	Tax Return Period
<u>See Attached Schedule of Ad Valorem Taxes</u>			<u>286,409</u>		
		TOTAL	<u>\$286,409</u>		

Robb & Stucky Limited, LLLP

Reporting Period 09/01/11 - 09/30/11

Case # 8:11-bk-02801

Attachment: Outstanding Taxes Payable

CLAIMANT NAME AND ADDRESS	VALID AMOUNT OF SECURED TAX CLAIM TO BE PAID FROM
Lee County Tax Collector	\$58,675.09
Lee County Tax Collector	\$56,267.76
Collier County Tax Collector	\$6,776.16
Collin County Tax Assessor	\$111,820.12
Hillsborough County Tax Collector	\$10,203.18
ORANGE COUNTY TAX COLLECTOR	\$195.79
ORANGE COUNTY TAX COLLECTOR	\$3,043.32
PALM BEACH COUNTY TAX COLLECTOR	\$1,522.29
PALM BEACH COUNTY TAX COLLECTOR	\$6,009.24
PALM BEACH COUNTY TAX COLLECTOR	\$16,482.70
PALM BEACH COUNTY TAX COLLECTOR	\$648.22
SARASOTA TAX COLLECTOR	\$3,509.14
SARASOTA TAX COLLECTOR	\$3,509.14
SEMINOLE COUNTY TAX COLLECTOR	\$2,747.34
SEMINOLE COUNTY TAX COLLECTOR	\$2,762.84
MARICOPA COUNTY TREASURER	\$2,236.88
TOTALS	\$286,409.21

ATTACHMENT 7

SUMMARY OF OFFICER OR OWNER COMPENSATION

SUMMARY OF PERSONNEL AND INSURANCE COVERAGES

Name of Debtor: Robb & Stucky Limited, LLLP Case Number: 8:11-bk-02801-CED

Reporting Period beginning 09/01/11 Period ending 09/30/11

Report all forms of compensation received by or paid on behalf of the Officer or Owner during the month. Include car allowances, payments to retirement plans, loan repayments, payments of Officer/Owner's personal expenses, insurance premium payments, etc. Do not include reimbursement for business expenses Officer or Owner incurred and for which detailed receipts are maintained in the accounting records.

<u>Name of Officer or Owner</u>	<u>Title</u>	<u>Payment Description</u>	<u>Amount Paid</u>
<u>See item 7: Schedule of officer/owner compensation</u>			<u>\$ 0</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

PERSONNEL REPORT

	<u>Full Time</u>	<u>Part Time</u>
Number of employees at beginning of period	0	0
Number hired during the period	0	0
Number terminated or resigned during period	0	0
Number of employees on payroll at end of period	0	0

CONFIRMATION OF INSURANCE

List all policies of insurance in effect, including but not limited to workers' compensation, liability, fire, theft, comprehensive, vehicle, health and life. For the first report, attach a copy of the declaration sheet for each type of insurance. For subsequent reports, attach a certificate of insurance for any policy in which a change occurs during the month (new carrier, increased policy limits, renewal, etc.).

<u>Agent and/or Carrier</u>	<u>Phone Number</u>	<u>Policy Number</u>	<u>Coverage Type</u>	<u>Expiration Date</u>	<u>Date Premium Due</u>
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Estate no longer owns property nor autos

The following lapse in insurance coverage occurred this month:

<u>Policy Type</u>	<u>Date Lapsed</u>	<u>Date Reinstated</u>	<u>Reason for Lapse</u>
<u>N/A</u>	_____	_____	_____
_____	_____	_____	_____

Check here if U. S. Trustee has been listed as Certificate Holder for all insurance policies.

ATTACHMENT 8

SIGNIFICANT DEVELOPMENTS DURING REPORTING PERIOD

Information to be provided on this page, includes, but is not limited to: (1) financial transactions that are not reported on this report, such as the sale of real estate (*attach closing statement*); (2) non-financial transactions, such as the substitution of assets or collateral; (3) modifications to loan agreements; (4) change in senior management, etc. Attach any relevant documents.
