

LINDA FAYE DAVENPORT
30030 PIPER RD
BON AQUA TN 37025

HCECDA
PO BOX 204
CENTERVILLE TN 37033

DAVENPORT, LINDA -
NGS SO ENDO CT
2010 CHURCH ST #312
NASHVILLE TN 37203

STEVEN L. LEFKOVITZ
LEFKOVITZ & LEFKOVITZ
618 CHURCH ST., #410
NASHVILLE, TN 37219-2321

HICKMAN CO CHANCERY CT
104 COLLEGE ST #202
CENTERVILLE TN 37033

PRN FUNDING LLC
ATTN COHEN, PHILLIP
3659 GREEN RD #318
BEACHWOOD OH 44122

BETTER BUSINESS BUREAU
PO BOX 198436
NASHVILLE TN 37219

HIGHLAND RADIOLOGY
C/O COLL SVC AGENCY
PO BOX 23484
CHATTANOOGA TN 37422

PRN FUNDING LLC
ATTN PHILLIP COHEN
3659 GREEN RD #318
BEACHWOOD OH 44122

D&B INVESTMENTS
PO BOX 516
BON AQUA TN 37025

HIGHLAND RADIOLOGY
PO BOX 246
DICKSON TN 37056

QUEST DIAGNOSTICS
C/O AMER MED COLL
PO BOX 1235
ELMSFORD NY 10523

DAVENPORT, CLARENCE
16 MIAMI DR SE
ROME GA 30161

HORIZON MED CTR
PO BOX 290429
NASHVILLE TN 37229

ROME RADIOLOGY
C/O HOLLOWAY
PO BOX 27
HUNTSVILLE AL 35804

DELL
PO BOX 81577
AUSTIN TX 78708

HORNICK, JOSEPH ESQ
98 CHURCH ST #1
DICKSON TN 37055

SE ER PHYS
C/O ALCOA BILLING CTR
3429 REGAL DR
ALCOA TN 37701

DICKSON MED ASSOC
PO BOX 415000 MSC 410143
NASHVILLE TN 37241

INTEGRITY CPA SERVICES
330 GRANKL RD #135A-388
BRENTWOOD TN 37027

SEABOURN PROP/B SBRN
9608 HWY 46
PO BOX 8
BON AQUA TN 37025

FIRST FEDERAL BANK
611 E COLLEGE ST
DICKSON TN 37055

IRS
PO BOX 21126
PHILADELPHIA PA 19114

SEABOURN, BETTY
9608 HWY 46
BON AQUA TN 37025

FREEMAN, BARBARA ESQ
213 COLT DR
NASHVILLE TN 37221

MOULTON, BARBARA ET AL
C/O HAUDE, IRENE R ESQ
95 WHITE BRIDGE RD #208
NASHVILLE TN 37205

TN DEPT LBR WRK FRC DEV
C/O TN ATTY GEN BK UNIT
PO BOX 20207
NASHVILLE TN 37202

GERIATRIC ANGELS, INC.
PO BOX 162
BON AQUA TN 37025

NASH ANESTHESIA SVC
C/O PYMT AMER SYS
PO BOX 24850
NASHVILLE TN 37202

TN DEPT REVENUE
C/O TN ATTY GEN BK UNIT
PO BOX 20207
NASHVILLE TN 37202

DAVENPORT, LINDA -

TSS

5100 GAMBLE DR #400

MINNEAPOLIS MN 55416

**United States Bankruptcy Court
Middle District of Tennessee**

Voluntary Petition

Name of Debtor (if individual, enter Last, First, Middle): DAVENPORT, LINDA FAYE	Name of Joint Debtor (Spouse) (Last, First, Middle):
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):	All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):
Last four digits of Soc. Sec./Complete EIN or other Tax ID No. (if more than one, state all) xxx-xx-1975	Last four digits of Soc. Sec./Complete EIN or other Tax ID No. (if more than one, state all)
Street Address of Debtor (No. and Street, City, and State): 30030 PIPER RD BON AQUA, TN	Street Address of Joint Debtor (No. and Street, City, and State):
ZIP Code 37025	ZIP Code
County of Residence or of the Principal Place of Business: HICKMAN	County of Residence or of the Principal Place of Business:
Mailing Address of Debtor (if different from street address):	Mailing Address of Joint Debtor (if different from street address):
ZIP Code	ZIP Code

Location of Principal Assets of Business Debtor (if different from street address above):

<p>Type of Debtor (Form of Organization) (Check one box)</p> <p><input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i></p> <p><input type="checkbox"/> Corporation (includes LLC and LLP)</p> <p><input type="checkbox"/> Partnership</p> <p><input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)</p>	<p>Nature of Business (Check one box)</p> <p><input type="checkbox"/> Health Care Business</p> <p><input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B)</p> <p><input type="checkbox"/> Railroad</p> <p><input type="checkbox"/> Stockbroker</p> <p><input type="checkbox"/> Commodity Broker</p> <p><input type="checkbox"/> Clearing Bank</p> <p><input type="checkbox"/> Other</p> <hr/> <p>Tax-Exempt Entity (Check box, if applicable)</p> <p><input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).</p>	<p>Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box)</p> <p><input type="checkbox"/> Chapter 7</p> <p><input type="checkbox"/> Chapter 9</p> <p><input checked="" type="checkbox"/> Chapter 11</p> <p><input type="checkbox"/> Chapter 12</p> <p><input type="checkbox"/> Chapter 13</p> <p><input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding</p> <p><input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding</p> <hr/> <p>Nature of Debts (Check one box)</p> <p><input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."</p> <p><input type="checkbox"/> Debts are primarily business debts.</p>
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<p>Filing Fee (Check one box)</p> <p><input checked="" type="checkbox"/> Full Filing Fee attached</p> <p><input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A.</p> <p><input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.</p>	<p>Check one box:</p> <p><input checked="" type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D).</p> <p><input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).</p> <p>Check if:</p> <p><input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,190,000.</p> <hr/> <p>Check all applicable boxes:</p> <p><input type="checkbox"/> A plan is being filed with this petition.</p> <p><input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).</p>
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Statistical/Administrative Information

Debtor estimates that funds will be available for distribution to unsecured creditors.

Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.

Estimated Number of Creditors									
1-49	50-99	100-199	200-999	1000-5,000	5001-10,000	10,001-25,000	25,001-50,000	100,001-100,000	OVER 100,000
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Estimated Assets				
<input type="checkbox"/> \$0 to \$10,000	<input checked="" type="checkbox"/> \$10,001 to \$100,000	<input type="checkbox"/> \$100,001 to \$1 million	<input type="checkbox"/> \$1,000,001 to \$100 million	<input type="checkbox"/> More than \$100 million

Estimated Liabilities				
<input type="checkbox"/> \$0 to \$50,000	<input type="checkbox"/> \$50,001 to \$100,000	<input checked="" type="checkbox"/> \$100,001 to \$1 million	<input type="checkbox"/> \$1,000,001 to \$100 million	<input type="checkbox"/> More than \$100 million

THIS SPACE IS FOR COURT USE ONLY

Voluntary Petition <i>(This page must be completed and filed in every case)</i>	Name of Debtor(s): DAVENPORT, LINDA FAYE
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All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet)

Location Where Filed: - None -	Case Number:	Date Filed:
Location Where Filed:	Case Number:	Date Filed:

Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet)

Name of Debtor: - None -	Case Number:	Date Filed:
District:	Relationship:	Judge:

<p style="text-align: center;">Exhibit A</p> <p>(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)</p> <p><input type="checkbox"/> Exhibit A is attached and made a part of this petition.</p>	<p style="text-align: center;">Exhibit B</p> <p>(To be completed if debtor is an individual whose debts are primarily consumer debts.)</p> <p>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 11 U.S.C. §342(b).</p> <p>X /s/ Steven L. Lefkovitz July 27, 2007</p> <p style="text-align: center;">Signature of Attorney for Debtor(s) (Date)</p> <p style="text-align: center;">Steven L. Lefkovitz 5953</p>
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Exhibit C

Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?

Yes, and Exhibit C is attached and made a part of this petition.

No.

Exhibit D

(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)

Exhibit D completed and signed by the debtor is attached and made a part of this petition.

If this is a joint petition:

Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.

Information Regarding the Debtor - Venue

(Check any 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, general 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 Property

(Check all applicable 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, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and

Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.

Voluntary Petition
(This page must be completed and filed in every case)

Name of Debtor(s):
DAVENPORT, LINDA FAYE

Signatures

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 11 U.S.C. §342(b).
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 11 U.S.C. §1515 are attached.
- Pursuant to 11 U.S.C. §1511, I request relief in accordance 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.

X _____
Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

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 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) setting a maximum fee for services chargeable by bankruptcy 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 bankruptcy 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.)

Address

X _____
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:

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.

Signature of Attorney

X /s/ Steven L. Lefkovitz
Signature of Attorney for Debtor(s)

Steven L. Lefkovitz 5953
Printed Name of Attorney for Debtor(s)

Lefkovitz & Lefkovitz
Firm Name

**618 Church St., #410
Nashville, TN 37219-2321**

Address

Email: slefkovitz@lefkovitz.com

615-256-8300 Fax: 615-255-4516
Telephone Number

July 27, 2007
Date

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 _____
Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

United States Bankruptcy Court
Middle District of Tennessee

In re LINDA FAYE DAVENPORT

Debtor(s)

Case No. _____

Chapter 11

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*

3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Must be accompanied by a motion for determination by the court.][Summarize exigent circumstances here.]* _____

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

Official Form 1, Exh. D (10/06) - Cont.

4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

Active military duty in a military combat zone.

5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ LINDA FAYE DAVENPORT
 LINDA FAYE DAVENPORT

Date: July 27, 2007

UNITED STATES BANKRUPTCY COURT
MIDDLE DISTRICT OF TENNESSEE

**NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b)
OF THE BANKRUPTCY CODE**

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days **before** the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)

1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

Certificate of Attorney

I hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

Steven L. Lefkovitz 5953

Printed Name of Attorney
Address:
618 Church St., #410
Nashville, TN 37219-2321
615-256-8300

X **/s/ Steven L. Lefkovitz** _____
Signature of Attorney Date

July 27, 2007

Certificate of Debtor

I (We), the debtor(s), affirm that I (we) have received and read this notice.

LINDA FAYE DAVENPORT

Printed Name(s) of Debtor(s)

Case No. (if known) _____

X **/s/ LINDA FAYE DAVENPORT** _____
Signature of Debtor Date

July 27, 2007

X _____
Signature of Joint Debtor (if any) Date

**United States Bankruptcy Court
Middle District of Tennessee**

In re LINDA FAYE DAVENPORT

Debtor(s)

Case No. _____

Chapter 11

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept.....	\$	<u>3,000.00</u>
Prior to the filing of this statement I have received.....	\$	<u>3,000.00</u>
Balance Due.....	\$	<u>0.00</u>

2. The source of the compensation paid to me was:

Debtor Other (specify):

3. The source of compensation to be paid to me is:

Debtor Other (specify):

4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Dated: July 27, 2007

/s/ Steven L. Lefkovitz

Steven L. Lefkovitz 5953

Lefkovitz & Lefkovitz

618 Church St., #410

Nashville, TN 37219-2321

615-256-8300 Fax: 615-255-4516

slefkovitz@lefkovitz.com

**United States Bankruptcy Court
Middle District of Tennessee**

In re LINDA FAYE DAVENPORT

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)
<i>Name of creditor and complete mailing address including zip code</i>	<i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	<i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	<i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff</i>	<i>Amount of claim [if secured, also state value of security]</i>
MOULTON, BARBARA ET AL C/O HAUDE, IRENE R ESQ 95 WHITE BRIDGE RD #208 NASHVILLE, TN 37205	MOULTON, BARBARA ET AL C/O HAUDE, IRENE R ESQ 95 WHITE BRIDGE RD #208 NASHVILLE, TN 37205		Contingent Unliquidated Disputed	97,449.36
PRN FUNDING LLC ATTN COHEN, PHILLIP 3659 GREEN RD #318 BEACHWOOD, OH 44122	PRN FUNDING LLC ATTN COHEN, PHILLIP 3659 GREEN RD #318 BEACHWOOD, OH 44122	CONTINGENT LIABILITY FOR CORPORATE DEBT OWED BY GERIATRIC ANGELS, INC.		40,000.00
HORIZON MED CTR PO BOX 290429 NASHVILLE TN 37229	HORIZON MED CTR PO BOX 290429 NASHVILLE TN 37229			5,114.03
HCECDA PO BOX 204 CENTERVILLE TN 37033	HCECDA PO BOX 204 CENTERVILLE TN 37033	CONTINGENT LIABILITY FOR CORPORATE DEBT OWED BY GERIATRIC ANGELS, INC.		4,400.00
FREEMAN, BARBARA ESQ 213 COLT DR NASHVILLE TN 37221	FREEMAN, BARBARA ESQ 213 COLT DR NASHVILLE TN 37221	CONTINGENT LIABILITY FOR CORPORATE DEBT OWED BY GERIATRIC ANGELS, INC.		3,800.00
INTEGRITY CPA SERVICES 330 GRANKL RD #135A-388 BRENTWOOD TN 37027	INTEGRITY CPA SERVICES 330 GRANKL RD #135A-388 BRENTWOOD TN 37027	CONTINGENT LIABILITY FOR CORPORATE DEBT OWED BY GERIATRIC ANGELS, INC.		3,755.00
HORNICK, JOSEPH ESQ 98 CHURCH ST #1 DICKSON TN 37055	HORNICK, JOSEPH ESQ 98 CHURCH ST #1 DICKSON TN 37055	CONTINGENT LIABILITY FOR CORPORATE DEBT OWED BY GERIATRIC ANGELS, INC.		1,000.00

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

(1)	(2)	(3)	(4)	(5)
<i>Name of creditor and complete mailing address including zip code</i>	<i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	<i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	<i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff</i>	<i>Amount of claim [if secured, also state value of security]</i>
NASH ANESTHESIA SVC C/O PYMT AMER SYS PO BOX 24850 NASHVILLE, TN 37202	NASH ANESTHESIA SVC C/O PYMT AMER SYS PO BOX 24850 NASHVILLE, TN 37202			960.00
QUEST DIAGNOSTICS C/O AMER MED COLL PO BOX 1235 ELMSFORD, NY 10523	QUEST DIAGNOSTICS C/O AMER MED COLL PO BOX 1235 ELMSFORD, NY 10523			733.55
NGS SO ENDO CT 2010 CHURCH ST #312 NASHVILLE TN 37203	NGS SO ENDO CT 2010 CHURCH ST #312 NASHVILLE TN 37203			693.00
SE ER PHYS C/O ALCOA BILLING CTR 3429 REGAL DR ALCOA, TN 37701	SE ER PHYS C/O ALCOA BILLING CTR 3429 REGAL DR ALCOA, TN 37701			651.00
HIGHLAND RADIOLOGY PO BOX 246 DICKSON TN 37056	HIGHLAND RADIOLOGY PO BOX 246 DICKSON TN 37056			486.00
BETTER BUSINESS BUREAU PO BOX 198436 NASHVILLE TN 37219	BETTER BUSINESS BUREAU PO BOX 198436 NASHVILLE TN 37219	CONTINGENT LIABILITY FOR CORPORATE DEBT OWED BY GERIATRIC ANGELS, INC.	Contingent	455.00
DICKSON MED ASSOC PO BOX 415000 MSC 410143 NASHVILLE TN 37241	DICKSON MED ASSOC PO BOX 415000 MSC 410143 NASHVILLE TN 37241			203.00
ROME RADIOLOGY C/O HOLLOWAY PO BOX 27 HUNTSVILLE, AL 35804	ROME RADIOLOGY C/O HOLLOWAY PO BOX 27 HUNTSVILLE, AL 35804			53.00
HIGHLAND RADIOLOGY C/O COLL SVC AGENCY PO BOX 23484 CHATTANOOGA, TN 37422	HIGHLAND RADIOLOGY C/O COLL SVC AGENCY PO BOX 23484 CHATTANOOGA, TN 37422			45.00

In re LINDA FAYE DAVENPORT

Debtor(s)

Case No. _____

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

**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 July 27, 2007

Signature /s/ LINDA FAYE DAVENPORT

LINDA FAYE DAVENPORT

Debtor

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.

**United States Bankruptcy Court
Middle District of Tennessee**

In re LINDA FAYE DAVENPORT,
Debtor

Case No. _____
Chapter 11

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	25,000.00		
B - Personal Property	Yes	3	0.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		24,000.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		115,000.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	5		221,156.68	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	2			
I - Current Income of Individual Debtor(s)	Yes	1			0.00
J - Current Expenditures of Individual Debtor(s)	Yes	1			0.00
Total Number of Sheets of ALL Schedules		18			
			25,000.00		
				360,156.68	

**United States Bankruptcy Court
Middle District of Tennessee**

In re LINDA FAYE DAVENPORT,
Debtor

Case No. _____

Chapter 11

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) (whether disputed or undisputed)	115,000.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	115,000.00

State the following:

Average Income (from Schedule I, Line 16)	0.00
Average Expenses (from Schedule J, Line 18)	0.00
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	4,333.33

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	115,000.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		221,156.68
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		221,156.68

In re LINDA FAYE DAVENPORT

Case No. _____

Debtor

SCHEDULE A. REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim
30030 PIPER RD BON AQUA, TN 37025 (LOTS 45 & 46) (NOT IN DEBTOR'S NAME, R.E. IS UNDER A LEASE/PURCHASE AGREEMENT)		-	25,000.00	24,000.00

Sub-Total > **25,000.00** (Total of this page)

Total > **25,000.00**

(Report also on Summary of Schedules)

0 continuation sheets attached to the Schedule of Real Property

In re LINDA FAYE DAVENPORT
Debtor

Case No. _____

SCHEDULE D. CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor" ,include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R H W J C	Husband, Wife, Joint, or Community		C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
		DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN						
Account No. LOTS 45 & 46								
D&B INVESTMENTS PO BOX 516 BON AQUA TN 37025	-		30030 PIPER RD BON AQUA, TN 37025 (LOTS 45 & 46) (NOT IN DEBTOR'S NAME, R.E. IS UNDER A LEASE/PURCHASE AGREEMENT)			X	24,000.00	0.00
			Value \$ 25,000.00					
Account No.								
			Value \$					
Account No.								
			Value \$					
Account No.								
			Value \$					
Subtotal (Total of this page)							24,000.00	0.00
Total (Report on Summary of Schedules)							24,000.00	0.00

0 continuation sheets attached

In re LINDA FAYE DAVENPORT

Case No. _____

Debtor

SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts who file a case under chapter 7 or 13 report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts who file a case under chapter 7 report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

Domestic support obligations

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trust or the order for relief. 11 U.S.C. § 507(a)(3).

Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

Deposits by individuals

Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered provided. 11 U.S.C. § 507(a)(7).

Taxes and certain other debts owed to governmental units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

Commitments to maintain the capital of an insured depository institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

Claims for death or personal injury while debtor was intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

In re LINDA FAYE DAVENPORT
Debtor

Case No. _____

SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

**Taxes and Certain Other Debts
Owed to Governmental Units**

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
								AMOUNT ENTITLED TO PRIORITY
Account No. IRS PO BOX 21126 PHILADELPHIA PA 19114	X	-	CONTINGENT LIABILITY FOR CORPORATE DEBT OWED BY GERIATRIC ANGELS, INC. AMOUNT IS ESTIMATED & DISPUTED	X	X	X	115,000.00	0.00
Account No. TN DEPT LBR WRK FRC DEV C/O TN ATTY GEN BK UNIT PO BOX 20207 NASHVILLE, TN 37202	X	-	CONTINGENT LIABILITY FOR CORPORATE DEBT OWED BY GERIATRIC ANGELS, INC. AMOUNT UNKNOWN IF ANY				0.00	0.00
Account No. TN DEPT REVENUE C/O TN ATTY GEN BK UNIT PO BOX 20207 NASHVILLE, TN 37202	X	-	AMOUNT UNKNOWN, IF ANY				0.00	0.00
Account No.								
Account No.								

Sheet 1 of 1 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

Subtotal (Total of this page)	115,000.00	0.00	115,000.00
Total (Report on Summary of Schedules)	115,000.00	0.00	115,000.00

In re LINDA FAYE DAVENPORT
Debtor

Case No. _____

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts filing a case under chapter 7, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	Husband, Wife, Joint, or Community		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
	C O D E B T O R	H W J C					
Account No. BETTER BUSINESS BUREAU PO BOX 198436 NASHVILLE TN 37219	X	-	CONTINGENT LIABILITY FOR CORPORATE DEBT OWED BY GERIATRIC ANGELS, INC.	X			455.00
Account No. DAVENPORT, CLARENCE 16 MIAMI DR SE ROME GA 30161		-					44,000.00
Account No. xxxx9659 DELL PO BOX 81577 AUSTIN TX 78708	X	-	CONTINGENT LIABILITY FOR CORPORATE DEBT OWED BY GERIATRIC ANGELS, INC.				3,188.74
Account No. xx0362 DICKSON MED ASSOC PO BOX 415000 MSC 410143 NASHVILLE TN 37241		-					203.00
Subtotal (Total of this page)							47,846.74

4 continuation sheets attached

In re **LINDA FAYE DAVENPORT**

Case No. _____

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M. I F C L A I M I S S U B J E C T T O S E T O F F, S O S T A T E.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	A M O U N T O F C L A I M	
		H W J C						
Account No. xxxxx5200 FIRST FEDERAL BANK 611 E COLLEGE ST DICKSON TN 37055	X	-	CONTINGENT LIABILITY FOR CORPORATE DEBT OWED BY GERIATRIC ANGELS, INC.				14,170.00	
Account No. FREEMAN, BARBARA ESQ 213 COLT DR NASHVILLE TN 37221	X	-	CONTINGENT LIABILITY FOR CORPORATE DEBT OWED BY GERIATRIC ANGELS, INC.				3,800.00	
Account No. HCECDA PO BOX 204 CENTERVILLE TN 37033	X	-	CONTINGENT LIABILITY FOR CORPORATE DEBT OWED BY GERIATRIC ANGELS, INC.				4,400.00	
Account No. HIGHLAND RADIOLOGY C/O COLL SVC AGENCY PO BOX 23484 CHATTANOOGA, TN 37422	-						45.00	
Account No. x1285 HIGHLAND RADIOLOGY PO BOX 246 DICKSON TN 37056	-						486.00	
Sheet no. 1 of 4 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page)	22,901.00

In re **LINDA FAYE DAVENPORT**

Case No. _____

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community		D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M. I F C L A I M I S S U B J E C T T O S E T O F F, S O S T A T E.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	A M O U N T O F C L A I M	
		H W J C							
Account No. xxxxx0848 HORIZON MED CTR PO BOX 290429 NASHVILLE TN 37229								5,114.03	
Account No. HORNICK, JOSEPH ESQ 98 CHURCH ST #1 DICKSON TN 37055		X	-	CONTINGENT LIABILITY FOR CORPORATE DEBT OWED BY GERIATRIC ANGELS, INC.				1,000.00	
Account No. INTEGRITY CPA SERVICES 330 GRANKL RD #135A-388 BRENTWOOD TN 37027		X	-	CONTINGENT LIABILITY FOR CORPORATE DEBT OWED BY GERIATRIC ANGELS, INC.				3,755.00	
Account No. MOULTON, BARBARA ET AL C/O HAUDE, IRENE R ESQ 95 WHITE BRIDGE RD #208 NASHVILLE, TN 37205		X	-		X	X	X	97,449.36	
Account No. Representing: MOULTON, BARBARA ET AL				HICKMAN CO CHANCERY CT 104 COLLEGE ST #202 CENTERVILLE TN 37033					
Sheet no. 2 of 4 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims								Subtotal (Total of this page)	107,318.39

In re **LINDA FAYE DAVENPORT**

Case No. _____

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community		D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M. I F C L A I M I S S U B J E C T T O S E T O F F, S O S T A T E.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	A M O U N T O F C L A I M	
		H W J C							
Account No. x5407 NASH ANESTHESIA SVC C/O PYMT AMER SYS PO BOX 24850 NASHVILLE, TN 37202			-					960.00	
Account No. x4506 NGS SO ENDO CT 2010 CHURCH ST #312 NASHVILLE TN 37203			-					693.00	
Account No. PRN FUNDING LLC ATTN COHEN, PHILLIP 3659 GREEN RD #318 BEACHWOOD, OH 44122		X	-	CONTINGENT LIABILITY FOR CORPORATE DEBT OWED BY GERIATRIC ANGELS, INC.				40,000.00	
Account No. xxxxxxxxxx/xxxxxx5862 QUEST DIAGNOSTICS C/O AMER MED COLL PO BOX 1235 ELMSFORD, NY 10523			-					733.55	
Account No. 4992 ROME RADIOLOGY C/O HOLLOWAY PO BOX 27 HUNTSVILLE, AL 35804			-					53.00	
Sheet no. 3 of 4 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims								Subtotal (Total of this page)	42,439.55

In re LINDA FAYE DAVENPORT, Case No. _____
 Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
 (Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community		C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	A M O U N T O F C L A I M
		H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. SE ER PHYS C/O ALCOA BILLING CTR 3429 REGAL DR ALCOA, TN 37701		-					651.00
Account No. SEABOURN PROP/B SBRN 9608 HWY 46 PO BOX 8 BON AQUA, TN 37025	X	-	CONTINGENT LIABILITY FOR CORPORATE DEBT OWED BY GERIATRIC ANGELS, INC.- AMOUNT UNKNOWN, IF ANY				0.00
Account No. Rxxxxxx2176 TSS 5100 GAMBLE DR #400 MINNEAPOLIS MN 55416		-				X	0.00
Account No.							
Account No.							

Sheet no. 4 of 4 sheets attached to Schedule of
 Creditors Holding Unsecured Nonpriority Claims

Subtotal
 (Total of this page) **651.00**

Total
 (Report on Summary of Schedules) **221,156.68**

In re LINDA FAYE DAVENPORT

Case No. _____

Debtor

SCHEDULE G. EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, 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).

Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
D&B INVESTMENTS PO BOX 516 BON AQUA TN 37025	LEASE/PURCHASE OF LOTS 45 & 46
PRN FUNDING LLC ATTN PHILLIP COHEN 3659 GREEN RD #318 BEACHWOOD, OH 44122	FACTORING AGREEMENT FOR ACCOUNTS RECEIVABLES
SEABOURN, BETTY 9608 HWY 46 BON AQUA TN 37025	LEASE OF BUSINESS SPACE LOCATED AT 9600 HWY 46 SO, BON AQUA, TN 37025 (this lease is to be rejected)

0 continuation sheets attached to Schedule of Executory Contracts and Unexpired Leases

In re LINDA FAYE DAVENPORT

Case No. _____

Debtor

SCHEDULE H. CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
GERIATRIC ANGELS, INC. PO BOX 162 BON AQUA TN 37025	BETTER BUSINESS BUREAU PO BOX 198436 NASHVILLE TN 37219
GERIATRIC ANGELS, INC. PO BOX 162 BON AQUA TN 37025	DELL PO BOX 81577 AUSTIN TX 78708
GERIATRIC ANGELS, INC. PO BOX 162 BON AQUA TN 37025	FIRST FEDERAL BANK 611 E COLLEGE ST DICKSON TN 37055
GERIATRIC ANGELS, INC. PO BOX 162 BON AQUA TN 37025	FREEMAN, BARBARA ESQ 213 COLT DR NASHVILLE TN 37221
GERIATRIC ANGELS, INC. PO BOX 162 BON AQUA TN 37025	HCECDA PO BOX 204 CENTERVILLE TN 37033
GERIATRIC ANGELS, INC. PO BOX 162 BON AQUA TN 37025	HORNICK, JOSEPH ESQ 98 CHURCH ST #1 DICKSON TN 37055
GERIATRIC ANGELS, INC. PO BOX 162 BON AQUA TN 37025	INTEGRITY CPA SERVICES 330 GRANKL RD #135A-388 BRENTWOOD TN 37027
GERIATRIC ANGELS, INC. PO BOX 162 BON AQUA TN 37025	MOULTON, BARBARA ET AL C/O HAUDE, IRENE R ESQ 95 WHITE BRIDGE RD #208 NASHVILLE, TN 37205
GERIATRIC ANGELS, INC. PO BOX 162 BON AQUA TN 37025	PRN FUNDING LLC ATTN COHEN, PHILLIP 3659 GREEN RD #318 BEACHWOOD, OH 44122
GERIATRIC ANGELS, INC. PO BOX 162 BON AQUA TN 37025	SEABOURN PROP/B SBRN 9608 HWY 46 PO BOX 8 BON AQUA, TN 37025
GERIATRIC ANGELS, INC. PO BOX 162 BON AQUA TN 37025	IRS PO BOX 21126 PHILADELPHIA PA 19114

In re LINDA FAYE DAVENPORT,
Debtor

Case No. _____

SCHEDULE H. CODEBTORS
(Continuation Sheet)

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
GERIATRIC ANGELS, INC. PO BOX 162 BON AQUA TN 37025	TN DEPT LBR WRK FRC DEV C/O TN ATTY GEN BK UNIT PO BOX 20207 NASHVILLE, TN 37202
GERIATRIC ANGELS, INC. PO BOX 162 BON AQUA TN 37025	TN DEPT REVENUE C/O TN ATTY GEN BK UNIT PO BOX 20207 NASHVILLE, TN 37202

**United States Bankruptcy Court
Middle District of Tennessee**

In re LINDA FAYE DAVENPORT
Debtor(s)

Case No. _____
Chapter 11

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 20 sheets [total shown on summary page plus 2], and that they are true and correct to the best of my knowledge, information, and belief.

Date July 27, 2007

Signature /s/ LINDA FAYE DAVENPORT
LINDA FAYE DAVENPORT
Debtor

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.