

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

Voluntary Petition

Name of Debtor (if individual, enter Last, First, Middle): CENTONZE, ANTHONY MAURICE	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-4728	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): 725 N. SECOND ST CLARKSVILLE, TN ZIP Code 37040	Street Address of Joint Debtor (No. and Street, City, and State): ZIP Code
County of Residence or of the Principal Place of Business: MONTGOMERY	County of Residence or of the Principal Place of Business:
Mailing Address of Debtor (if different from street address): 750 YORK RD. CLARKSVILLE, TN ZIP Code 37042	Mailing Address of Joint Debtor (if different from street address): ZIP Code
Location of Principal Assets of Business Debtor (if different from street address above):	

Type of Debtor (Form of Organization) (Check one box) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)	Nature of Business (Check one box) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input checked="" type="checkbox"/> Other Tax-Exempt Entity (Check box, if applicable) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).	Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box) <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input checked="" type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding Nature of Debts (Check one box) <input 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." <input checked="" type="checkbox"/> Debts are primarily business debts.
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Filing Fee (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <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. <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.	Chapter 11 Debtors Check one box: <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input checked="" type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input checked="" type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,190,000. Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <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).
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Statistical/Administrative Information <input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.	THIS SPACE IS FOR COURT USE ONLY																				
Estimated Number of Creditors <table style="width:100%; text-align: center;"> <tr> <td>1-49</td> <td>50-99</td> <td>100-199</td> <td>200-999</td> <td>1000-5,000</td> <td>5001-10,000</td> <td>10,001-25,000</td> <td>25,001-50,000</td> <td>100,001-100,000</td> <td>OVER 100,000</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>	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"/>	
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 type="checkbox"/> \$10,001 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																					
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																					

Voluntary Petition <i>(This page must be completed and filed in every case)</i>	Name of Debtor(s): CENTONZE, ANTHONY MAURICE
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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 _____ Signature of Attorney for Debtor(s) (Date)</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):

CENTONZE, ANTHONY MAURICE

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

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.

X /s/ ANTHONY MAURICE CENTONZE
Signature of Debtor **ANTHONY MAURICE CENTONZE**

X _____
Signature of Joint Debtor

Telephone Number (If not represented by attorney)

September 5, 2007
Date

Signature of a Foreign Representative

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/ Roy C. DeSha, Jr.
Signature of Attorney for Debtor(s)

Roy C. DeSha, Jr. 6924
Printed Name of Attorney for Debtor(s)

Roy C. DeSha, Jr.
Firm Name

1106 18th Avenue South
Nashville, TN 37212

Address

gcw@deshalaw.com roy@deshalaw.com
(615) 369-9600 Fax: (615) 369-9613

Telephone Number

September 5, 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 ANTHONY MAURICE CENTONZE

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/ ANTHONY MAURICE CENTONZE
 ANTHONY MAURICE CENTONZE

Date: September 5, 2007

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

In re ANTHONY MAURICE CENTONZE

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>
Belk c/o GE Money Bank-- Bankruptcy Dept. P. O. Box 103104 Roswell, GA 30076	Belk c/o GE Money Bank--Bankruptcy Dept. P. O. Box 103104 Roswell, GA 30076			750.00
City of Clarksville--Finance & Revenue One Public Square, Suite 300 Clarksville, TN 37040	City of Clarksville--Finance & Revenue One Public Square, Suite 300 Clarksville, TN 37040	Property taxes		12,800.00
Clarkville Chiropractic c/o Credit Bureau Systems 121 West Dunbar Cave Road Clarksville, TN 37040	Clarkville Chiropractic c/o Credit Bureau Systems 121 West Dunbar Cave Road Clarksville, TN 37040			319.00
Dillard's c/o GE Money Bank-- Bankruptcy Dept. P. O. Box 103104 Roswell, GA 30076	Dillard's c/o GE Money Bank--Bankruptcy Dept. P. O. Box 103104 Roswell, GA 30076			2,600.00
Dr. Kurita c/o Credit Bureau Systems 121 West dunbar Cave Road Clarksville, TN 37040	Dr. Kurita c/o Credit Bureau Systems 121 West dunbar Cave Road Clarksville, TN 37040	Medical		769.30
Emergency Physicians P. O. Box 41682 Philadelphia, PA 19101	Emergency Physicians P. O. Box 41682 Philadelphia, PA 19101			440.00
H & H Heating c/o Credit Bureau Systems 121 West dunbar Cave Road Clarksville, TN 37040	H & H Heating c/o Credit Bureau Systems 121 West dunbar Cave Road Clarksville, TN 37040		Contingent Disputed	442.14
Independent Bank 5050 Poplar Ave., Suite 112 Memphis, TN 38157	Independent Bank 5050 Poplar Ave., Suite 112 Memphis, TN 38157	Ford Explorer		6,000.00 (0.00 secured)
IRS c/o Craig Morford 110 9th Ave. South, Suite A961 Nashville, TN 37203	IRS c/o Craig Morford 110 9th Ave. South, Suite A961 Nashville, TN 37203		Contingent Disputed	33,000.00

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>
Lowe's c/o GE Money Bank-- Bankruptcy Dept. P. O. Box 103104 Roswell, GA 30076	Lowe's c/o GE Money Bank--Bankruptcy Dept. P. O. Box 103104 Roswell, GA 30076			4,100.00
Mart Fendley 128 Public Square Clarksville, TN 37040	Mart Fendley 128 Public Square Clarksville, TN 37040		Contingent Disputed	15,000.00
Mohawk Floors c/o Credit Bureau Systems 121 West Dunbar Cave Road Clarksville, TN 37040	Mohawk Floors c/o Credit Bureau Systems 121 West Dunbar Cave Road Clarksville, TN 37040		Contingent Disputed	2,809.50
Montgomery County Ambulance c/o Credit Bureau Systems 121 West Dunbar Cave Road Clarksville, TN 37040	Montgomery County Ambulance c/o Credit Bureau Systems 121 West Dunbar Cave Road Clarksville, TN 37040			745.00
Morton Mechanical c/o Credit Bureau Systems 121 West Dunbar Cave Road Clarksville, TN 37040	Morton Mechanical c/o Credit Bureau Systems 121 West Dunbar Cave Road Clarksville, TN 37040		Contingent Disputed	330.00
Prudential Realty c/o Runyon and Runyon 301 Main Street Clarksville, TN 37040	Prudential Realty c/o Runyon and Runyon 301 Main Street Clarksville, TN 37040			1,850.00
Radford Plumbing c/o Runyon and Runyon 301 Main Street Clarksville, TN 37040	Radford Plumbing c/o Runyon and Runyon 301 Main Street Clarksville, TN 37040			1,605.00
Robert Orr Sysco c/o John Cheadle 129 Second Ave. North Nashville, TN 37201	Robert Orr Sysco c/o John Cheadle 129 Second Ave. North Nashville, TN 37201			24,000.00
Southern Foods 117 Mitch McConnell Way Bowling Green, KY 42101	Southern Foods 117 Mitch McConnell Way Bowling Green, KY 42101		Contingent Disputed	28,000.00
TN DEPARTMENT OF REVENUE ANDREW JACKSON STATES OFFICE BLDG 500 DEADERICK STREET NASHVILLE, TN 37242	TN DEPARTMENT OF REVENUE ANDREW JACKSON STATES OFFICE BLDG 500 DEADERICK STREET NASHVILLE, TN 37242		Contingent Disputed	80,000.00
Unique Screen Media c/o Credit Mediators Incorp. P. O. Box 456 Upper Darby, PA 19082	Unique Screen Media c/o Credit Mediators Incorp. P. O. Box 456 Upper Darby, PA 19082		Contingent Disputed	4,000.00

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

Date September 5, 2007

Signature /s/ ANTHONY MAURICE CENTONZE
ANTHONY MAURICE CENTONZE
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.

ANTHONY MAURICE CENTONZE
750 YORK RD.
CLARKSVILLE TN 37042

ROY C. DESHA, JR.
ROY C. DESHA, JR.
1106 18TH AVENUE SOUTH
NASHVILLE, TN 37212

BELK
C/O GE MONEY BANK--BANKRUPTCY DEPT.
P. O. BOX 103104
ROSWELL GA 30076

CITY OF CLARKSVILLE--FINANCE & REVENUE
ONE PUBLIC SQUARE, SUITE 300
CLARKSVILLE TN 37040

CLARKSVILLE CHIROPRACTIC
C/O CREDIT BUREAU SYSTEMS
121 WEST DUNBAR CAVE ROAD
CLARKSVILLE TN 37040

CLIFF SITES/NATHAN DEERE
C/O MITCHELL ROSS
107 NORTH THIRD STREET
CLARKSVILLE TN 37040

DILLARD'S
C/O GE MONEY BANK--BANKRUPTCY DEPT.
P. O. BOX 103104
ROSWELL GA 30076

DR. KURITA
C/O CREDIT BUREAU SYSTEMS
121 WEST DUNBAR CAVE ROAD
CLARKSVILLE TN 37040

EMERGENCY PHYSICIANS
P. O. BOX 41682
PHILADELPHIA PA 19101

GARNER & CONNER, PLLC
P. OI. BOX 5059
MARYVILLE TN 37802

H & H CONTRACTORS
C/O MARK HUERTA
1787 RIVERHAVEN DRIVE
ADAMS TN 37010

H & H HEATING
C/O CREDIT BUREAU SYSTEMS
121 WEST DUNBAR CAVE ROAD
CLARKSVILLE TN 37040

HEATHSOUTH BONE & JOINT GROUP
331 LANDRUM PLACE
CLARKSVILLE TN 37043

HOLT, C. L. AND JUDITH
750 YORK ROAD
CLARKSVILLE TN 37042

HOLT, C.L. AND JUDITH
750 YORK ROAD
CLARKSVILLE TN 37042

INDEPENDENT BANK
5050 POPLAR AVE., SUITE 112
MEMPHIS TN 38157

IRS
C/O CRAIG MORFORD
110 9TH AVE. SOUTH, SUITE A961
NASHVILLE TN 37203

LEHMAN BROS. BANK/AURORA LOAN SERVICES
C/O CORPORATION SERVICE CO.
2908 POSTON AVENUE
NASHVILLE TN 37203

LOWE'S
C/O GE MONEY BANK--BANKRUPTCY DEPT.
P. O. BOX 103104
ROSWELL GA 30076

MART FENDLEY
128 PUBLIC SQUARE
CLARKSVILLE TN 37040

MOHAWK FLOORS
C/O CREDIT BUREAU SYSTEMS
121 WEST DUNBAR CAVE ROAD
CLARKSVILLE TN 37040

MONTGOMERY COUNTY AMBULANCE
C/O CREDIT BUREAU SYSTEMS
121 WEST DUNBAR CAVE ROAD
CLARKSVILLE TN 37040

MORTON MECHANICAL
C/O CREDIT BUREAU SYSTEMS
121 WEST DUNBAR CAVE ROAD
CLARKSVILLE TN 37040

PRUDENTIAL REALTY
C/O RUNYON AND RUNYON
301 MAIN STREET
CLARKSVILLE TN 37040

RADFORD PLUMBING
C/O RUNYON AND RUNYON
301 MAIN STREET
CLARKSVILLE TN 37040

ROBERT ORR SYSCO
C/O JOHN CHEADLE
129 SECOND AVE. NORTH
NASHVILLE TN 37201

SOUTHERN FOODS
117 MITCH MCCONNELL WAY
BOWLING GREEN KY 42101

TERRELL, GEORGE
C/O BATEMAN AND BATEMAN
212 MADISON STREET
CLARKSVILLE TN 37040

TN DEPARTMENT OF REVENUE
ANDREW JACKSON STATES OFFICE BLDG
500 DEADERICK STREET
NASHVILLE TN 37242

TN DEPARTMENT OF REVENUE
C/O ATTY GENERAL ROBERT COOPER, JR.
P. O. BOX 20207
NASHVILLE TN 37202

TURNER, CLEVELAND
C/O ALBERT MARKS
233A DUNBAR CAVE ROAD
CLARKSVILLE TN 37043

UNIQUE SCREEN MEDIA
C/O CREDIT MEDIATORS INCORP.
P. O. BOX 456
UPPER DARBY PA 19082