| Vultical States Bankrupter Contr         Voluntary Petition           Same of Chaos of Individual, court Last, Pist, Middle);         Ammond Chaos of Individual, court Last, Pist, Middle);         Ammond Chaos of Individual, and Last, Pist, Middle);         All Obler Names used by the Deform (Sprone) (Law, Find, Middle);         All Obler Names used by the Deform (Sprone) (Law, Find, Middle);           All Obler Names used by the Deform (Sprone) (Law, Find, Middle);         All Obler Names used by the Deform (Sprone) (Law, Find, Middle);         All Obler Names used by the Deform (Sprone) (Law, Find, Middle);           Stored Addees of Deform (Sprone) (Law, Find, Middle);         All Obler Names used by the Deform (Sprone) (Law, Find, Middle);         ZP Colspon           Stored Addees of Deform (Sprone) (Law, Find, Middle);         Stored Addees of Deform (Sprone) (Law, Find, Middle);         ZP Colspon           Stored Addees of Deform (Sprone) (Law, Find, Middle);         Stored Addees of Deform (Sprone) (Law, Find, Middle);         ZP Colspon         ZP Colspon           Stored Addees of Deform (Sprone) (Law, Find, Middle);         Stored Addees of Deform (Sprone) (Law, Find, Middle);         ZP Colspon         ZP Colspon           County of Reideman Cor of the Principal Place of Business:         ZP Colspon         ZP Colspon         ZP Colspon           County of Reideman Cor of the Principal Place of Business         Midling Address of Deform (Sprone) (Deform (Form Hore Hore));         ZP Colspon         ZP Colspon         County of Reideman                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | B1 (Official Form 1)(4/10)      |                                |             |                                                                                                   |                          |                             |                          |                                     |                                |                         |                        |
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| PPS PROPERTIES, LLC       All Ober Names and by the Deliver the fact & years include married, markets, and trade names):         All Ober Names and by the Deliver (Market names):       All Ober Names and by the Deliver (Market names):         Itade family digits of Sues, Sec. or Individual Taxpayer (D), (TTN) No.Complete EIN taxes in and, and trade names):       All Ober Names and by the Deliver (Market names):         Itade family digits of Sues, Sec. or Individual Taxpayer (D), (TTN) No.Complete EIN taxes in and, and trade names):       Street Address of Deliver (Market Names (D), (TTN) No.Complete EIN taxes in and, and trade names):         200415046       Street Address of Deliver (Market Names (D), (TTN) No.Complete EIN taxes in and, and the sec in and taxes in and, and the sec in and, and taxes in and trade sec in the sec in and, and the sec in and, and the sec in and taxes in the sec in the s                                                                                                                                                                                                                                                                                                            |                                 |                                |             |                                                                                                   |                          | y Petition                  |                          |                                     |                                |                         |                        |
| (include married, maride, and trade names):       (include married, maride, and trade names):         Last four digits of Nue. See: or Individual Taxpayer LD. ((TIN) No. Complete TN)       Last four digits of Soc. See: or Individual Taxpayer LD. ((TIN) No. Complete TN)         20-4414046       Street Address of Debter (No. and Street, City, and State):       For Box 680007         PO BOX 680007       Street Address of Debter (No. and Street, City, and State):       Street Address of Joint Debter (No. and Street, City, and State):         PO BOX 680007       Street Address of Debter (If different from street address):       Maling Address of Joint Debter (No. and Street, City, and State):         PO BOX 680007       Street Address of Debter (If different from street address):       Maling Address of Joint Debter (No. and Street, City, and State):         WilliamSon       Coastry of Residence or of the Principal Place of Business:       UP Code         (If different from street address):       Maling Address of Joint Debter (If different from street address):       Maling Address of Joint Debter (If Cick one box)         (If different from street address):       Beah to a bis form from the formation in the street address in t                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                 |                                |             |                                                                                                   | Name                     | of Joint De                 | ebtor (Spouse            | e) (Last, First,                    | Middle):                       |                         |                        |
| Control web and by Control web                                                                                                                          |                                 |                                | 3 years     |                                                                                                   |                          | All O<br>(inclu             | her Names<br>de married, | used by the J<br>maiden, and        | Joint Debtor i<br>trade names) | n the last 8 years<br>: |                        |
| PO BOX 680007<br>Franklin, TN       ZP Code       ZP Code         County of Residence or of the Principal Place of Business:       Gounty of Residence or of the Principal Place of Business:       County of Residence or of the Principal Place of Business:         Mailing Address of Debtor (if different from street address):       Mailing Address of Debtor (if different from street address):       Mailing Address of Joint Debtor (if different from street address):         Type of Debtor<br>(Perm of Organization)<br>(Check one box)       Business Debtor<br>(If different from street address above):       Chapter of Buskruptey Code Under Which<br>the Petition is Filed (Check one box)         Single Asset of Business<br>See Rohlbo De ongreg 2 different from street address above):       Business Attend 1 (15 B)<br>(16 B) (16 B) (16 B)<br>(16 B) (16                                                                                                                                                                                                                                                                                                                        | (if more than one, state all)   | r Individual-Taxpa             | yer I.D. (1 | ITIN) No./O                                                                                       | Complete E               |                             |                          |                                     | r Individual-T                 | Caxpayer I.D. (ITIN)    | No./Complete EIN       |
| Strong         Strong         County of Residence or of the Principal Place of Business:           Williamson         County of Residence or of the Principal Place of Business:         County of Residence or of the Principal Place of Business:           Williamson         Mailing Address of Debtor (if different from street address):         Mailing Address of Joint Debtor (if different from street address):           ZIP Code         ZIP Code         ZIP Code           Location of Principal Assets of Business above):         (Check one box)         Check one box)           (Hifterent from street address):         (Check one box)         Check one box)           (Check one box)         Check one box)         Check one box)           (Check one box)         Check one box)         Check one box)           (Check one box)         Check one box)         Check one box)           Berkbibb Do narge 2 of bis form.         Check one box)         Check one box)           Check one box)         Check one primarily form         Check one box)           Check one box of principal Allow         Check one box)         Check one box)           Check one box of principal Allow         Check one primarily for a accercange formidary formation for a foreign Nummain Proceeding           Check the box of aprincipal form in a street address is provide to individual street address is provide to individual foralindividual formatity for a accercane form in 110 SC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | PO BOX 680007                   | and Street, City, a            | and State): | :                                                                                                 |                          | Street                      | Address of               | Joint Debtor                        | r (No. and Str                 | eet, City, and State):  |                        |
| County of Residence or of the Principal Place of Business:<br>Williamson<br>Mailing Address of Debtor (if different from street address):<br>Mailing Address of Debtor (if different from street address):<br>ZIP Code<br>ZIP Code<br>Chapter of Bankrouptery Code Under Which the Petition is Pitel (Check one box)<br>Chapter of Bankrouptery Code Under Which the Petition is Pitel (Check one box)<br>Chapter of Bankrouptery Code Under Which the Petition is Pitel (Check one box)<br>Chapter of Bankrouptery Code Under Which the Petition is Pitel (Check one box)<br>Chapter of Bankrouptery Code Under Which the Petition is Pitel (Check one box)<br>Chapter 13<br>Chapter of Bankrouptery Code Under Which the Petition is Pitel (Check one box)<br>Chapter 13<br>Chapter 13<br>Chapter 14<br>Chapter 13<br>Chapter 14<br>Chapter 13<br>Chapter 14<br>Chapter 13<br>Chapter 14<br>Chapter 14<br>Chapter 14<br>Chapter 14<br>Chapter 12<br>Chapter 14<br>Chapter 13<br>Chapter 14<br>Chapter 14<br>Chapt |                                 |                                |             |                                                                                                   |                          |                             |                          |                                     |                                |                         | ZIP Code               |
| Williamson       Mailing Address of Debtor (if different from street address):       Mailing Address of Joint Debtor (if different from street address):         ZIP Code       ZIP Code       ZIP Code         Lacation of Principal Assets of Business Debtor<br>(if different from street address above):       Status of Business<br>(Check one box)       Chapter of Bankruptcy Code Under Which<br>the Petition is Filed (Check one box)         Individual (includes Joint Debtory)<br>See Exhibit D on page 2 of this form.       Check one box)       Chapter of Bankruptcy Code Under Which<br>the Petition is Filed (Check one box)         Corporation (Includes LL and the above entities,<br>check this box and state type of entity below.)       Health Care Business<br>Single Asset Real Listue as defined<br>in U.S.C. § 101 (ST B)       Chapter of Bankruptcy Code Under Which<br>the Petition is Filed (Check one box)         Componition (Includes LL and the above entities,<br>check this box and state type of entity below.)       Check one box)       Chapter 13       Chapter 13       Debtor is not cove of the above entities.<br>Code (the Internal Revenue Code)         Full Filing Fee canadod       Debtor is a tax-exempt organization<br>detuch is anable to get/secale to individual only). Mut<br>attack signed patient for the could condex code (the Internal Revenue Code)       Chapter 11 Debtors<br>in according with this petition.         Pati Filing Fee canadod       Editor and the secale andificate to diagtamet one debta re primarily<br>cobetor is matche bab                                                                                                                                                                                                                                                                                                                                                                                                                                                         | County of Pasidance or of the   | Principal Place of             | Business    |                                                                                                   | 87068                    | Count                       | v of Reside              | ance or of the                      | Principal Pla                  | ce of Business          |                        |
| ZP Code       Location of Principal Assets of Business Debtor<br>(if different from street address above):       Type of Debtor<br>(if different from street address above):       Chapter of Bankrupty Code Under Which<br>(Check one box)<br>(Check one box)         Individual (includes join Debtors)<br>Soc Exhibits on page 2 of his form.<br>Comportation (includes LLC and LLP)<br>Partnership       Health Care Business<br>(Check one box)       Chapter 7<br>Chapter 7<br>Chapter 15 Petition for Recognition<br>of a Foreign Main Proceeding         Other (I debort is not one of the above entries,<br>check this box and state type of entry below.       Check for Bankrupty Code Under Which<br>(Check one box)       Chapter 15 Petition for Recognition<br>of a Foreign Main Proceeding         Other (I debort is not one of the above entries,<br>check this box and state type of entry below.       Other<br>Tax-Exempt Entity<br>(Check tox is familicable)       Chapter 10<br>Chapter 10<br>Debtor is a tax-exempt organization<br>under Title 26 of the United State<br>Code (the Internal Revenue Code)       Debtor is<br>a personal, Bently, on bankvala prinning for<br>a personal, Bently, on bankvala prinning for<br>a personal, Bently, on bankvala prinning for<br>a personal form on a small biaset oblor a defined in 11 USC § 101(S1D).         Full Filing Fee attached       Debtor is a small biaset of the United State<br>and staged applicable to chapter 7 individuals only). Mast<br>debtor is analyticable prinning for distribution to unsecured creditors.     The Debtor         Hing Fee varier requested (applicable to chapter 7 individuals only). Mast<br>debtor is analyticable provide applicable to chapter 7 individuals only). Mast<br>debtor is anabas siged applicable to chapter 7 individuals only). Mast<br>debtor i                                                                                                                                                                                                                                                                                                                                                                | Williamson                      |                                |             |                                                                                                   |                          |                             | -                        |                                     | _                              |                         |                        |
| Leaction of Principal Assets of Business Debtor<br>(if different from street address above):         Type of Debtor<br>(form of Organization)<br>(Check one box)         Individual (includes Joint Debtors)<br>See Eshible on page 2 of this form.       Nature of Business<br>(Check one box)       Chapter of Bankruptcy Code Under Which<br>the Petition is Filed (Check one box)         Corporation (includes LLC and LLP)       Health Care Business<br>(Check one box)       Chapter 12       Chapter 15 Petition for Recognition<br>of a Foreign Main Proceeding         Other (If debor is not one of the above entities,<br>check this box and state type of entity below.       Other (If debor is not one of the above entities,<br>check this box and state type of entity below.       Other (If debor is not one of the above entities,<br>check this box and state type of entity below.       Debtor is a tax-exempt Entity<br>(Check one thox)       Debtor is a tax-exempt Entity<br>(Check one tox)       Debtor is a tax-exempt Seguination<br>of a Foreign Nonmain Proceeding         Full Filing Fee attached       Filing Fee (Check one box)       Check one box)       Check one box:       Debtor is a tax-exempt Seguination<br>of a personal, family, on busines debtors a defined in 11 U.S.C.§ 101(S1D).         Poll Filing Fee attached       Debtor is on all business debtors a defined in 11 U.S.C.§ 110(S1D).       Debtor is a and business debtor a definition in U.S.C.§ 110(S1D).         Poll Filing Fee attached       Filing Fee attached       Debtor is a seguination of the court's consideration. See Official Form Maint       Debtor is a seguinat business debtor a definition in U.S.C.§ 110(S                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Mailing Address of Debtor (if   | different from stre            | eet addres  | s):                                                                                               |                          | Mailir                      | ng Address               | of Joint Debt                       | tor (if differer               | it from street address  | ):                     |
| (if different from street address above):         Type of Dabtor<br>(Form of Organization)<br>(Check one box)       Nature of Business<br>(Check one box)       Chapter of Rankruptcy Code Under Which<br>the Petition is Filed (Check one box)         Individual (includes Joint Debtors)<br>See Exhibit D on page 2 of this form.       Bingle Asset Real Estate as defined<br>in 11 U.S.C. § 101 (51B)       Chapter 15 Petition for Recognition<br>of a Foreign Main Proceeding         Partnership       Commodity Broker       Chapter 12       Chapter 13       Chapter 12         Partnership       Other (T debtor is not one of the above entities,<br>check this box and state type of entity below.)       Other (T debtor is not one of the above entities,<br>check box, if applicable)       Other (T debtor is not one of the above entites,<br>check box, if applicable)       Debtor is a mark-recept programization<br>inder Title 2 of the United State<br>Code (the Internal Revenue Code).       Debts are primarily<br>business debtor.       Debtor is<br>a personal, finity, vone box       Debts are primarily<br>business debtor.         Full Filing Fee attached       Filing Fee conder condersconderstrain steppleable to individual sony). Must<br>attach signed application for the courd's consideration. See Official Form 3A.       Check the park in stallments (applicable to chapter 7 individuals ony). Must<br>attach signed application for the courd's consideration. See Official Form 3A.       Check the park in stallments (applicable to chapter 7 individuals ony). Must<br>attach signed application for the courd's consideration. See Official Form 3A.       Check the park vert ongle the park in stallments<br>apersonal, finity, vone and offined in 11 U.S.C. § 101(51D).                                                                                                                                                                                                                                                                                                                                                                                                                   |                                 |                                |             | Γ                                                                                                 | ZIP Code                 | _                           |                          |                                     |                                |                         | ZIP Code               |
| (Iorm of Organization)<br>(Check one box)       (Check one box)       (Check one box)         I Individual (includes Join Debtors)<br>See Exhibit D on page 2 of this form.       I Health Care Business<br>(Chapter 1)       Chapter 15 Petition for Recognition<br>of a Foreign Nama Proceeding         Corporation (includes LLC and LLP)<br>Partnership       Check one box entities,<br>Check this box and state type of entity below.)       Chapter 12<br>Chapter 12       Chapter 15 Petition for Recognition<br>of a Foreign Nonmain Proceeding         Other (If debtor is not one of the above entities,<br>check this box and state type of entity below.)       Tax-Exempt Entity<br>(Check one box);<br>(Check one box)       Debtor set are exempt organization<br>under Title 26 of the United States<br>Code (the Internal Revenue Code).       Debtor is not a small business debtor as defined in 11 U.S.C. § 101(S1D).         Fluil Filing Fee the paid in installments (applicable to individuals only). Must<br>attach signed application for the courts consideration certifying that the<br>debtor is unates that, family consumer debts, family                                                                                                                                                                                                                                                                                                             |                                 |                                |             |                                                                                                   |                          |                             |                          |                                     |                                |                         |                        |
| (Check one box) <ul> <li>Individual (includes Joint Debtors)</li> <li>Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B)</li> <li>Railroad</li> <li>Comportino (includes LLC and LLP)</li> <li>Parmership</li> <li>Other If debtor is none of the above entities.</li> <li>Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B)</li> <li>Railroad</li> <li>Chapter 13</li> <li>Chapter 15 Petition for Recognition of a Foreign Main Proceeding</li> <li>Chapter 13</li> <li>Chapter 14</li> <li>Chapter 13</li> <li>Chapter 14</li> <li>Chapter 15</li> <li>Chapter 15</li> <li>Chapter 14</li> <li>Chapter 15</li> <li>Chapter 15</li> <li>Chapter 15</li> <li>Chapter 15</li> <li>Chapter 14</li> <li>Chapter 14</li></ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Type of Debt                    | or                             |             | Nature o                                                                                          | of Business              |                             |                          |                                     |                                |                         | lich                   |
| Individual (acludes Join Debtors)         See Exhibit D on page 2 of this form.         Corporation (includes LLC and LLP)         Partnership         Other (If debue is not one of the above entities, check this box and state type of entity below.)         Debtor is a tax-exempt conjunction under Title 26 of the United States Code (the Internal Revenue Code).         Fling Fee (Check one box)         Full Fling Fee value requested (applicable to individuals only). Must attach signed application for the courts consideration certifying that the debtor sumates that, after any exempt programity consideration. See Official Form 3A.         Fling Fee value requested (applicable to chapter 7 individuals only). Must attach signed application for the courts consideration certifying that the debtor sumates that, after any exempt programy is social deal and administrative expenses paid. There will be no funds available for distribution to unsecured creditors.         Photor estimates that, fame any exempt programity is consideration. Stoop 1, 0000 ± 50,000 ± 50,000 ± 50,000 ± 50,000 ± 50,000 ± 50,000 ± 50,000 ± 50,000 ± 50,000 ± 50,000 ± 50,000 ± 50,000 ± 50,000 ± 50,000 ± 50,000 ± 50,000 ± 50,000 ± 50,000 ± 50,000 ± 50,000 ± 50,000 ± 50,000 ± 50,000 ± 50,000 ± 50,000 ± 50,000 ± 50,000 ± 50,000 ± 50,000 ± 50,000 ±                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                 |                                |             |                                                                                                   |                          |                             |                          | the l                               | Petition is Fil                | ed (Check one box)      |                        |
| Individual (includes Joint Debtors)       in 11 U.S.C. § 101 (518)       Im 11 U.S.C. § 101 (518)       Im 11 U.S.C. § 101 (518)         See Exhibit D on page 2 of this form.       Corporation (includes LLC and LLP)       Im 11 U.S.C. § 101 (518)       Im 11 U.S.C. § 101 (518)       Im 11 U.S.C. § 101 (518)         Other (ff debtar in not not of the above entities check this box and state type of entity below.)       Im 11 U.S.C. § 101 (518)       Im 11 U.S.C. § 101 (518)       Im 11 U.S.C. § 101 (518)         Im 12 U.S.C. § 101 (518)       Im 11 U.S.C. § 101 (518)       Im 11 U.S.C. § 101 (518)       Im 11 U.S.C. § 101 (518)         Im 12 U.S.C. § 101 (518)       Im 11 U.S.C. § 101 (518)       Im 11 U.S.C. § 101 (518)       Im 11 U.S.C. § 101 (518)         Im 12 U.S.C. § 101 (518)       Im 11 U.S.C. § 101 (518)       Im 11 U.S.C. § 101 (518)       Im 11 U.S.C. § 101 (518)         Im 12 U.S.C. § 101 (518)       Im 11 U.S.C. § 101 (518)       Im 11 U.S.C. § 101 (518)       Im 11 U.S.C. § 101 (518)         Im 12 U.S.C. § 101 (518)       Im 11 U.S.C. § 101 (518)       Im 11 U.S.C. § 101 (510)       Im 11 U.S.C. § 101 (510)         Im 12 U.S.C. § 101 (518)       Im 11 U.S.C. § 101 (518)       Im 11 U.S.C. § 101 (512)       Im 11 U.S.C. § 101 (512)         Im 12 U.S. § 101 (512)       Im 11 U.S.C. § 101 (512)         Im 12 U.S. § 101 (S12)       I                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | (Check one bo                   | x)                             |             |                                                                                                   |                          | dafinad                     |                          |                                     |                                | 15 D (1)                | D '.'                  |
| See Exhibit D on page 2 of this form.       Corporation (includes LLC and LLP)       Railroad       Chapter 11       Chapter 12       Chapter 13                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ☐ Individual (includes Joint    | Debtors)                       |             |                                                                                                   |                          | uermeu                      |                          |                                     |                                |                         |                        |
| <ul> <li>Corporation (includes LLC and LLP)</li> <li>Partnership</li> <li>Other (If debot is not one of the above entities, check this box and state type of entity below.)</li> <li>Clearing Bank</li> <li>Check this box and state type of entity below.)</li> <li>Check this box and state type of entity below.)</li> <li>Check this box and state type of entity below.)</li> <li>Check this box and state type of entity below.)</li> <li>Check this box and state type of entity below.)</li> <li>Check this box and state type of entity below.)</li> <li>Check this box and state type of entity below.)</li> <li>Check this box and state type of entity below.)</li> <li>Check this box and state type of entity below.)</li> <li>Full Filing Fee (Check one box)</li> <li>Check and box a small business debot as defined in 11 U.S.C. § 101(S1D).</li> <li>Debot is a small business debot as defined in 11 U.S.C. § 101(S1D).</li> <li>Debot is a small business debot as defined in 11 U.S.C. § 101(S1D).</li> <li>Check if i</li> <li>Debot is a small business debot as defined in 11 U.S.C. § 101(S1D).</li> <li>Check and system as \$2,343,300 (anoton subject to adjustment on 4/0/1/3 and every three years thereafter).</li> <li>Check and system as \$2,443,300 (anoton subject to adjustment on 4/0/1/3 and every three years thereafter).</li> <li>Check and system as \$2,343,300 (anoton subject to adjustment on 4/0/1/3 and every three years thereafter).</li> <li>Check and system as \$2,413,300 (anoton subject to adjustment on 4/0/1/3 and every three years thereafter).</li> <li>Check and system asystem as that function for the court's consideration. See Of</li></ul>                                                                                                                                                                                                                                       | See Exhibit D on page 2 o       | f this form.                   | 🛛 Railı     | road                                                                                              | . ,                      |                             |                          |                                     |                                |                         |                        |
| □ Partnership       □ Commodity Broker       □ Commodity Broker       □ Commodity Broker         □ Commodity Broker       □ Commodity Broker       □ Commodity Broker       □ Commodity Broker         □ Check für (f debor is not one of the above entities, check this box and state type of entity below.)       □ Commodity Broker       □ Debts are primarily comsumer debts, (Check one box)       □ Debts are primarily comsumer debts, (Check one box)       □ Debts are primarily comsumer debts, (Check one box)       □ Debts are primarily comsumer debts, (Check one box)       □ Debts are primarily comsumer debts, (Check one box)       □ Debts are primarily comsumer debts, (Check one box)       □ Debts are primarily comsumer debts, (Check one box)       □ Debts are primarily comsumer debts, (Check one box)       □ Debts are primarily comsumer debts, (Check one box)       □ Debts are primarily comsumer debts, (Check one box)       □ Debtor is not a small business debtor as defined in 11 US.C \$ 101(51D).       □ Debtor is not as mall business debtor as defined in 11 US.C \$ 101(51D).       □ Debtor is not as mall business debtor as defined in 11 US.C \$ 101(51D).       □ Debtor is not as mall business debtor as defined in 11 US.C \$ 101(51D).       □ Debtor is not as mall business debtor as defined in 11 US.C \$ 101(51D).       □ Debtor is not as mall business debtor as defined in 11 US.C \$ 101(51D).       □ Debtor is not as mall business debtor as defined in 11 US.C \$ 101(51D).       □ Debtor is not as mall business debtor as defined in 11 US.C \$ 101(51D).       □ Debtor is not as mall business debtor as defined in 11 US.C \$ 101(51D).       □ Debtor is not as mall business debtor as defined in 11 US.C \$ 10                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Corporation (includes LLC       | C and LLP)                     |             |                                                                                                   |                          |                             | 1                        |                                     | _                              | 1                       | U                      |
| □ Other (If debur is not one of the above entities, check this box and state type of entity below.)       □ Other ''       Tax-Exempt Entity (Check box, if applicable) (Check bit, if applicable) (Check fit) (Check box, if applicable) (Check fit) (Check bit) (Check fit) (Check box, if applicable) (Check fit) (Check bit) (Check fit) (Check bit) (Check fit) (Check fit) (Check bit) (Check fit) (Check fit                                                                                                                                                                          | □ Partnership                   |                                |             |                                                                                                   | oker                     |                             |                          | 0115                                |                                | 6                       | 8                      |
| Full Films       Films       Tax-Exempt Entity<br>(Check box, if applicable)<br>(Debtor is a tax-exempt organization<br>under Title 26 of the United State<br>Code (the Internal Revenue Code).       Debts are primarily on<br>a personal, family, or household purpose."       Debts are primarily<br>business debts.         Full Films       Fee (Check one box)       Check one box:       Chapter 11 Debtors         Full Films       Fee (Check one box:       Check one box:       Chapter 11 Debtors         Full Films       Fee obe paid in installments (applicable to individuals only). Must<br>attach signed application for the courts consideration certifying that the<br>debtor is unable to pay fee except in installments. Rule 1006(b). See Official<br>Form 3A.       Check one box:       Check and Business debtor as defined in 11 U.S.C. § 101(51D).         Probutor is a pay fee except in installments. Rule 1006(b). See Official<br>Form 3A.       Check and application for the courts consideration. See Official Form 3B.       Check all applicable boxes:<br>(h applicable boxes:<br>hare less than \$2,343.300 (amount subject to adjustment on 4:01/13 and every three years thereafter).<br>Check all applicable boxes:<br>(h acceptances of the plan were solicited prepetition from one or more classes of creditors,<br>in accordance with 11 U.S.C. § 1126(b).         Statistical/Administrative Information       Debtor is \$0,0001       50,0001       50,0001       50,0001         Bebtor estimates that funds will be available for distribution to unsecured creditors.       Debtor estimates that, after any exempt property is excluded and administrative expenses paid,<br>there will be no funds available for distribution to unsecure                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                 |                                |             |                                                                                                   |                          |                             |                          |                                     | Nature                         | of Debts                |                        |
| Image: construction of the construc                                                                                                                                                       | check this box and state type   | of entity below.)              |             | Tax-Exe                                                                                           | not Entity               |                             |                          |                                     | (Check                         | one box)                |                        |
| Filing Fee (Check one box)       Chapter 11 Debtors         Full Filing Fee to be paid in installments (applicable to individuals only). Must ach signed application for the court's consideration certifying that the debtor is mable to pay fee except in installments. Rule 1006(b). See Official Form 3A.       Check one box:       Chapter 11 Debtors         Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.       Check all applicable boxes:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                 |                                | unde        | (Check box, if applicable)<br>☐ Debtor is a tax-exempt organiz<br>under Title 26 of the United St |                          | e)<br>anization<br>d States | defined<br>"incurr       | 1 in 11 U.S.C. §<br>ed by an indivi | § 101(8) as idual primarily    | busi                    |                        |
| Full Filing Fee attached <ul> <li>Filing Fee to be paid in installments (applicable to individuals only). Mut atch signed application for the court's consideration certifying that the debtor is numble to pay fee except in installments. Rule 1006(b). See Official Form 3A.</li> <li>Filing Fee waiver requested (applicable to chapter 7 individuals only). Mut attach signed application for the court's consideration. See Official Form 3A.</li> </ul> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D).           Check if:         Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$22,343,300 (amount subject to adjustment on 4/01/13 and every three years thereafter).           Check all applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B. <ul> <li>A plan is being filed with this petition.</li> <li>A cceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).</li> </ul> Statistical/Administrative Information <ul> <li>Debtor of stiribution to unsecured creditors.</li> <li>Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.</li> </ul> <ul> <li>THIS SPACE IS FOR COURT USE ONLY</li> <li>Stonoon is \$10,0000 is \$10,0000 is \$10,0000 is \$10,0000 is \$10,0000 is \$100,0000 is</li></ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                 |                                |             | e (the Interr                                                                                     | al Revenu                | e Code).                    | a perso                  |                                     |                                |                         |                        |
| □       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.       □       Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).         Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.       □       Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).         Statistical/Administrative Information       ■       Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).         Model of the court's consideration. See Official Form 3B.       □       Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).         Statistical/Administrative Information       ■       Check all applicable boxes:       □         □       Debtor estimates that, fafer any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.       ■         Estimated Ausets       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       □       <                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | -                               | ee (Check one box              | .)          |                                                                                                   |                          |                             |                          | -                                   |                                |                         |                        |
| □       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.       Check if:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Full Filing Fee attached        |                                |             |                                                                                                   |                          |                             |                          |                                     |                                |                         |                        |
| debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <ul> <li>Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.</li> <li>Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.</li> <li>Check all applicable boxes:</li></ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                 |                                |             |                                                                                                   |                          |                             | u shinin o'ush           | ness dector as t                    |                                | .5.0.3 101(012).        |                        |
| Form 3A.         Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.       Check all applicable boxes:         A plan is being filed with this petition.       A plan is being filed with this petition.         A cceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).         Statistical/Administrative Information       Acceptances of the plan were solicited prepetition from one or more classes of 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.       THIS SPACE IS FOR COURT USE ONLY         Estimated Number of Creditors       Image: Comparison of the stribution to unsecured creditors.       Image: Comparison of the stribution to unsecured creditors.         Statisted Assets       Image: Stonoon of stribution stribution to stonoon it to \$100,000 to \$                                                                                                                                                                                                                                                                                                                                                |                                 |                                |             |                                                                                                   |                          |                             |                          |                                     |                                |                         |                        |
| Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.       A plan is being filed with this petition.         Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).       THIS SPACE IS FOR COURT USE ONLY         Statistical/Administrative Information       Debtor estimates that funds will be available for distribution to unsecured creditors.       THIS SPACE IS FOR COURT USE ONLY         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       Image: Station of the state                                                                                                                                                                                                                                                                                                                       | Form 3A.                        |                                |             |                                                                                                   |                          |                             | . , , ,                  | amouni subjeci                      | i io aajusimeni                | on 4/01/15 and every in | ree years inereajier). |
| Statistical/Administrative Information       Image: Correction of the plan were solicited prependion from one of more classes of creditors, in accordance with 11 U.S.C. § 1126(b).         Statistical/Administrative Information       Image: Correction of the plan were solicited prependion from one of more classes of creditors, in accordance with 11 U.S.C. § 1126(b).         Image: Debtor estimates that funds will be available for distribution to unsecured creditors.       Image: Correction of the plan were solicited prependion from one of more classes of creditors, in accordance with 11 U.S.C. § 1126(b).         Image: Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.       Image: Correction of the plan were solicited prependion from one of more classes of creditors, there will be no funds available for distribution to unsecured creditors.         Estimated Number of Creditors       Image: Correction of the plan were solicited prependion from one of more classes of creditors, there will be no funds available for distribution to unsecured creditors.         Image: Debtor estimated Assets       Image: Debtor estimated Assets       Image: Debtor estimated Assets         So to       \$50,0001 to       \$100,0001 to       \$500,0001 to \$10,0001 to \$10,00001 to \$                                                                                                                                                                                                                                                                                                                                                                          |                                 |                                |             |                                                                                                   | st 🛛                     | 11                          |                          | this petition.                      |                                |                         |                        |
| Statistical/Administrative Information         Image: Debtor estimates that funds will be available for distribution to unsecured creditors.       THIS SPACE IS FOR COURT USE ONLY         Image: 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       Image: Debtor estimate is that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.       Image: Debtor estimate is the image: Debtor estimate is th                                                                                                                                                                                                                                                                                     | attach signed application for t | ne court's considerati         | on. See On  | ficial Form 5                                                                                     | _ L L -                  |                             |                          |                                     |                                | one or more classes of  | creditors,             |
| $ \begin{array}{ c c c c c c c c c c c c c c c c c c c$                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Statistical/Administrative In   | formation                      |             |                                                                                                   |                          |                             | e with 11 O.s.           | 5.C. § 1120(0).                     |                                | SPACE IS FOR COUR       | T USE ONLY             |
| there will be no funds available for distribution to unsecured creditors.         Estimated Number of Creditors         Image: Strength of the second strength of the s                                                                                                                                                                                                                                    |                                 |                                | for distrib | bution to un                                                                                      | secured cr               | editors.                    |                          |                                     |                                | STREE IS FOR COOR       |                        |
| $ \begin{array}{c ccccccccccccccccccccccccccccccccccc$                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                 |                                |             |                                                                                                   |                          | ive expense                 | es paid,                 |                                     |                                |                         |                        |
| $\begin{array}{c ccccccccccccccccccccccccccccccccccc$                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                 |                                | _           | _                                                                                                 | _                        | -                           | _                        | _                                   |                                |                         |                        |
| Estimated Assets       Image: State of the                                                                                                                                                                 | 1- 50- 100-                     | 200-                           | 1,000-      | 5,001-                                                                                            | 10,001-                  | 25,001-                     | 50,001-                  | OVER                                |                                |                         |                        |
| $ \begin{array}{c c c c c c c c c c c c c c c c c c c $                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                 | ~~~                            | . , 0       | ,000                                                                                              | ,000                     | ,000                        |                          | ,000                                | -                              |                         |                        |
| S0 to       \$50,001 to       \$100,001 to       \$50,000       \$10,000,001       \$10,000,001       \$50,000,001       \$100,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001       \$500,000,001                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | \$0 to \$50,001 to \$100,       | 001 to \$500,001<br>000 to \$1 | to \$10     | \$10,000,001<br>to \$50                                                                           | \$50,000,001<br>to \$100 | \$100,000,001<br>to \$500   | \$500,000,001            | More than                           |                                |                         |                        |
| \$0 to \$50,001 to \$100,001 to \$500,001 \$1,000,001 \$10,000,001 \$50,000,001 \$100,000,001 \$500,000,001 More than \$50,000 \$100,000 \$500,000 to \$1 to \$10 to \$50 to \$100 to \$500 to \$1 billion \$1 billion                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                 |                                |             |                                                                                                   |                          |                             |                          |                                     | ]                              |                         |                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | \$0 to \$50.001 to \$100.       | 001 to \$500,001<br>000 to \$1 | to \$10     | \$10,000,001<br>to \$50                                                                           | \$50,000,001<br>to \$100 | \$100,000,001<br>to \$500   | \$500,000,001            | More than                           |                                |                         |                        |

| B1 (Official For                              | rm 1)(4/10)                                                                                                                                                                                                                                                             | -                                                              | Page 2                                                                |  |  |  |
|-----------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|-----------------------------------------------------------------------|--|--|--|
| Voluntar                                      | y Petition                                                                                                                                                                                                                                                              | Name of Debtor(s):<br>PPS PROPERTIES, LLC                      |                                                                       |  |  |  |
| (This nage mi                                 | •<br>ust be completed and filed in every case)                                                                                                                                                                                                                          | PPS PROPERTIES,                                                |                                                                       |  |  |  |
| (11115 puge 1111                              | All Prior Bankruptcy Cases Filed Within Las                                                                                                                                                                                                                             | <b>1</b><br><b>t 8 Years</b> (If more than two                 | attach additional sheet)                                              |  |  |  |
| Location                                      |                                                                                                                                                                                                                                                                         | Case Number:                                                   | Date Filed:                                                           |  |  |  |
| Where Filed:                                  | - None -                                                                                                                                                                                                                                                                |                                                                |                                                                       |  |  |  |
| Location<br>Where Filed:                      |                                                                                                                                                                                                                                                                         | Case Number:                                                   | Date Filed:                                                           |  |  |  |
|                                               | nding Bankruptcy Case Filed by any Spouse, Partner, or                                                                                                                                                                                                                  | Affiliate of this Debtor (If                                   | f more than one, attach additional sheet)                             |  |  |  |
| Name of Debt<br>- None -                      | or:                                                                                                                                                                                                                                                                     | Case Number:                                                   | Date Filed:                                                           |  |  |  |
| District:                                     |                                                                                                                                                                                                                                                                         | Relationship:                                                  | Judge:                                                                |  |  |  |
|                                               | Exhibit A                                                                                                                                                                                                                                                               | (To be completed if debtor is                                  | Exhibit B<br>an individual whose debts are primarily consumer debts.) |  |  |  |
| forms 10K a<br>pursuant to S<br>and is reques | bleted if debtor is required to file periodic reports (e.g.,<br>nd 10Q) with the Securities and Exchange Commission<br>Section 13 or 15(d) of the Securities Exchange Act of 1934<br>sting relief under chapter 11.)<br>A is attached and made a part of this petition. | have informed the petition<br>12, or 13 of title 11, United    |                                                                       |  |  |  |
|                                               | Fvl                                                                                                                                                                                                                                                                     | l<br>nibit C                                                   |                                                                       |  |  |  |
| ☐ Yes, and<br>■ No.                           | or own or have possession of any property that poses or is alleged to Exhibit C is attached and made a part of this petition.<br>Exhibit C is attached and made a part of this petition.<br>Exhibit C is attached and made a part of this petition.                     | nibit D                                                        |                                                                       |  |  |  |
| -                                             | D completed and signed by the debtor is attached and made                                                                                                                                                                                                               |                                                                |                                                                       |  |  |  |
| If this is a joi                              | int petition:                                                                                                                                                                                                                                                           |                                                                |                                                                       |  |  |  |
| 🗖 Exhibit                                     | D also completed and signed by the joint debtor is attached a                                                                                                                                                                                                           | and made a part of this petit                                  | tion.                                                                 |  |  |  |
|                                               | Information Regardin                                                                                                                                                                                                                                                    | ng the Debtor - Venue                                          |                                                                       |  |  |  |
|                                               | (Check any ap                                                                                                                                                                                                                                                           | •                                                              |                                                                       |  |  |  |
|                                               | Debtor has been domiciled or has had a residence, princip<br>days immediately preceding the date of this petition or for                                                                                                                                                |                                                                |                                                                       |  |  |  |
|                                               | There is a bankruptcy case concerning debtor's affiliate, g                                                                                                                                                                                                             | eneral partner, or partnershi                                  | p pending in this District.                                           |  |  |  |
|                                               | Debtor is a debtor in a foreign proceeding and has its prin-<br>this District, or has no principal place of business or assets<br>proceeding [in a federal or state court] in this District, or the<br>sought in this District.                                         | s in the United States but is<br>he interests of the parties w | a defendant in an action or<br>ill be served in regard to the relief  |  |  |  |
|                                               | Certification by a Debtor Who Reside<br>(Check all app                                                                                                                                                                                                                  |                                                                | ial Property                                                          |  |  |  |
|                                               | Landlord has a judgment against the debtor for possession                                                                                                                                                                                                               |                                                                | ox checked, complete the following.)                                  |  |  |  |
|                                               | (Name of landlord that obtained judgment)                                                                                                                                                                                                                               |                                                                |                                                                       |  |  |  |
|                                               |                                                                                                                                                                                                                                                                         |                                                                |                                                                       |  |  |  |
|                                               | (Address of landlord)                                                                                                                                                                                                                                                   |                                                                |                                                                       |  |  |  |
|                                               | Debtor claims that under applicable nonbankruptcy law, the entire monetary default that gave rise to the judgment                                                                                                                                                       |                                                                |                                                                       |  |  |  |
|                                               |                                                                                                                                                                                                                                                                         |                                                                |                                                                       |  |  |  |

Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

| (Official Form 1)(4/10)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Page                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Voluntary Petition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Name of Debtor(s):<br>PPS PROPERTIES, LLC                                                                                                                                                                                                                                                                                                                                                                                                                |  |
| This page must be completed and filed in every case)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
| 0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | natures                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |
| Signature(s) of Debtor(s) (Individual/Joint)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Signature of a Foreign Representative                                                                                                                                                                                                                                                                                                                                                                                                                    |  |
| I declare under penalty of perjury that the information provided in this petition is true and correct.<br>[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.<br>[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). | <ul> <li>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.</li> <li>(Check only one box.)</li> <li>□ 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</li> </ul> |  |
| I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter<br>of title 11 specified in this petition. A certified copy of the order granting<br>recognition of the foreign main proceeding is attached.                                                                                                                                                                                                                                |  |
| <b>X</b> 7                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | X                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |
| X                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | X                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
| X Signature of Joint Debtor                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Printed Name of Foreign Representative                                                                                                                                                                                                                                                                                                                                                                                                                   |  |
| Signature of Joint Debtor                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Date                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |
| Telephone Number (If not represented by attorney)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Signature of Non-Attorney Bankruptcy Petition Preparer                                                                                                                                                                                                                                                                                                                                                                                                   |  |
| Date                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 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                                                                                                                                                                                                                                                                                                         |  |
| Signature of Attorney*                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | compensation and have provided the debtor with a copy of this document<br>and the notices and information required under 11 U.S.C. §§ 110(b),<br>110(h), and 342(b); and, (3) if rules or guidelines have been promulgated                                                                                                                                                                                                                               |  |
| X /s/ Steven L. Lefkovitz                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services                                                                                                                                                                                                                                                                                                                                                                                        |  |
| Signature of Attorney for Debtor(s)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | chargeable by bankruptcy petition preparers, I have given the debtor notice<br>of the maximum amount before preparing any document for filing for a                                                                                                                                                                                                                                                                                                      |  |
| Steven L. Lefkovitz 5953                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | debtor or accepting any fee from the debtor, as required in that section.<br>Official Form 19 is attached.                                                                                                                                                                                                                                                                                                                                               |  |
| Printed Name of Attorney for Debtor(s)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Official Form 19 is autoneu.                                                                                                                                                                                                                                                                                                                                                                                                                             |  |
| LEFKOVITZ & LEFKOVITZ<br>Firm Name<br>618 CHURCH ST., #410                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Printed Name and title, if any, of Bankruptcy Petition Preparer                                                                                                                                                                                                                                                                                                                                                                                          |  |
| NASHVILLE, TN 37219                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Social-Security number (If the bankrutpcy petition preparer is not<br>an individual, state the Social Security number of the officer,<br>principal, responsible person or partner of the bankruptcy petition                                                                                                                                                                                                                                             |  |
| Address                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | preparer.)(Required by 11 U.S.C. § 110.)                                                                                                                                                                                                                                                                                                                                                                                                                 |  |
| Email: slefkovitz@lefkovitz.com<br>615-256-8300 Fax: 615-255-4516                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
| Telephone Number                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
| December 2, 2010                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Address                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |
| Date<br>*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a<br>certification that the attorney has no knowledge after an inquiry that the                                                                                                                                                                                                                                                                                                                                                                                                                  | X                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |
| information in the schedules is incorrect.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
| Signature of Debtor (Corporation/Partnership)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <ul> <li>Date</li> <li>Signature of Bankruptcy Petition Preparer or officer, principal, responsible</li> </ul>                                                                                                                                                                                                                                                                                                                                           |  |
| 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.                                                                                                                                                                                                                                                                                                                                                                                                | person, or partner whose Social Security number is provided above.<br>Names and Social-Security numbers of all other individuals who prepared or                                                                                                                                                                                                                                                                                                         |  |
| The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.                                                                                                                                                                                                                                                                                                                                                                                                                                                               | assisted in preparing this document unless the bankruptcy petition preparer i<br>not an individual:                                                                                                                                                                                                                                                                                                                                                      |  |
| 🗙 /s/ ERNEST COLEY, SR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
| Signature of Authorized Individual                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
| ERNEST COLEY, SR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | If more than one person prepared this document, attach additional sheets                                                                                                                                                                                                                                                                                                                                                                                 |  |
| Printed Name of Authorized Individual                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | conforming to the appropriate official form for each person.                                                                                                                                                                                                                                                                                                                                                                                             |  |
| SENIOR MEMBER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | A bankruptcy petition preparer's failure to comply with the provisions of                                                                                                                                                                                                                                                                                                                                                                                |  |
| Title of Authorized Individual                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 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.                                                                                                                                                                                                                                                                                                                       |  |
| December 2, 2010                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |

| <b>United States Bankruptcy Court</b> |
|---------------------------------------|
| Middle District of Tennessee          |

|        | Μ                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | iddle District of Tennessee                                                                                                                 | :                                                           |                                             |
|--------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|---------------------------------------------|
| In re  | PPS PROPERTIES, LLC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Debtor(s)                                                                                                                                   | Case No.<br>Chapter                                         | 11                                          |
|        | DISCLOSURE OF COMP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | ENSATION OF ATTOR                                                                                                                           | <b>RNEY FOR DE</b>                                          | BTOR(S)                                     |
| C      | Pursuant to 11 U.S.C. § 329(a) and Bankruptcy compensation paid to me within one year before the spe rendered on behalf of the debtor(s) in contemplation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | filing of the petition in bankruptcy                                                                                                        | , or agreed to be paid                                      | d to me, for services rendered or to        |
|        | For legal services, I have agreed to accept                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                             | \$                                                          | 6,000.00                                    |
|        | Prior to the filing of this statement I have received                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                             |                                                             | 6,000.00                                    |
|        | Balance Due                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                             |                                                             | 0.00                                        |
| 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 Dther (specify):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                             |                                                             |                                             |
| 4.     | ■ I have not agreed to share the above-disclosed co                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | mpensation with any other person                                                                                                            | unless they are memb                                        | pers and associates of my law firm.         |
|        | □ I have agreed to share the above-disclosed compe<br>copy of the agreement, together with a list of the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | ensation with a person or persons w<br>names of the people sharing in the                                                                   | ho are not members compensation is atta                     | or associates of my law firm. A ched.       |
| 5.     | In return for the above-disclosed fee, I have agreed to                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | o render legal service for all aspects                                                                                                      | s of the bankruptcy c                                       | ase, including:                             |
| t<br>c | <ul> <li>Analysis of the debtor's financial situation, and report of the debtor's financial situation, and report of the debtor at the meeting of credits.</li> <li>Representation of the debtor at the meeting of credits.</li> <li>[Other provisions as needed]</li> <li>Negotiations with secured creditors to reaffirmation agreements and applications of the secure of liens on the secure of liens of the secure of liens on the secure of liens of the secure of liens on the secure of liens on the secure of liens of the secure of liens of the secure of liens of the secure of the s</li></ul> | statement of affairs and plan which<br>ditors and confirmation hearing, an<br>o reduce to market value; exe<br>tions as needed; preparation | may be required;<br>d any adjourned hea<br>mption planning; | rings thereof;<br>preparation and filing of |
| 6. 1   | By agreement with the debtor(s), the above-disclosed<br>Representation of the debtors in any<br>any other adversary proceeding.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                             |                                                             | es, relief from stay actions or             |
|        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | CERTIFICATION                                                                                                                               |                                                             |                                             |
|        | certify that the foregoing is a complete statement of ankruptcy proceeding.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | any agreement or arrangement for                                                                                                            | payment to me for re                                        | presentation of the debtor(s) in            |
| Dated  | : December 2, 2010                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | /s/ Steven L. Lefk                                                                                                                          |                                                             |                                             |
|        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Steven L. Lefkovi<br>LEFKOVITZ & LEI<br>618 CHURCH ST.,<br>NASHVILLE, TN 3                                                                  | FKOVITZ<br>#410                                             |                                             |

615-256-8300 Fax: 615-255-4516 slefkovitz@lefkovitz.com

In re **PPS PROPERTIES, LLC** 

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, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

| (1)                                                                            | (2)                                                                                                                                                                      | (3)                                                                         | (4)                                                                                       | (5)                                                              |
|--------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|------------------------------------------------------------------|
| Name of creditor and complete<br>mailing address including zip<br>code         | Name, telephone number and complete<br>mailing address, including zip code, of<br>employee, agent, or department of creditor<br>familiar with claim who may be contacted | Nature of claim (trade<br>debt, bank loan,<br>government contract,<br>etc.) | Indicate if claim is<br>contingent,<br>unliquidated,<br>disputed, or subject<br>to setoff | Amount of claim [if<br>secured, also state<br>value of security] |
| WILLIAMSON COUNTY<br>TRUSTEE<br>PO BOX 648<br>Franklin, TN 37065               | WILLIAMSON COUNTY TRUSTEE<br>PO BOX 648<br>Franklin, TN 37065                                                                                                            | 244 NOAH DR                                                                 |                                                                                           | 7,262.67                                                         |
| CITY OF HOPKINSVILLE<br>PROPERTY TAX<br>PO BOX 707<br>Hopkinsville, KY 42241   | CITY OF HOPKINSVILLE PROPERTY<br>TAX<br>PO BOX 707<br>Hopkinsville, KY 42241                                                                                             | 510 NOEL AVE                                                                |                                                                                           | 2,184.18                                                         |
| CHRISTIAN COUNTY<br>SHERIFF<br>216 W 7TH STREET<br>Hopkinsville, KY 42240      | CHRISTIAN COUNTY SHERIFF<br>216 W 7TH STREET<br>Hopkinsville, KY 42240                                                                                                   | 510 NOEL AVE                                                                |                                                                                           | 2,160.00                                                         |
| CITY OF FRANKLIN<br>PO BOX 705<br>Franklin, TN 37065                           | CITY OF FRANKLIN<br>PO BOX 705<br>Franklin, TN 37065                                                                                                                     | 244 NOAH DR                                                                 |                                                                                           | 1,315.00                                                         |
| CITY OF FRANKLIN<br>PO BOX 705<br>Franklin, TN 37065                           | CITY OF FRANKLIN<br>PO BOX 705<br>Franklin, TN 37065                                                                                                                     | 244 NOAH DR                                                                 |                                                                                           | 1,315.00                                                         |
| COLEY HAWKINS, INC<br>12790 EL CAMINO REAL<br>SUITE 130<br>San Diego, CA 92130 | COLEY HAWKINS, INC<br>12790 EL CAMINO REAL<br>SUITE 130<br>San Diego, CA 92130                                                                                           |                                                                             |                                                                                           | 1,000.00                                                         |
| WILLIAMSON COUNTY<br>TRUSTEE<br>PO BOX 648<br>Franklin, TN 37065               | WILLIAMSON COUNTY TRUSTEE<br>PO BOX 648<br>Franklin, TN 37065                                                                                                            | 240 NOAH DR                                                                 |                                                                                           | 4.36                                                             |
| CITY OF FRANKLIN<br>PO BOX 705<br>Franklin, TN 37065                           | CITY OF FRANKLIN<br>PO BOX 705<br>Franklin, TN 37065                                                                                                                     | 240 NOAH DR                                                                 |                                                                                           | 1.00                                                             |
| CITY OF FRANKLIN<br>PO BOX 705<br>Franklin, TN 37065                           | CITY OF FRANKLIN<br>PO BOX 705<br>Franklin, TN 37065                                                                                                                     | 240 NOAH DR                                                                 |                                                                                           | 1.00                                                             |
|                                                                                |                                                                                                                                                                          |                                                                             |                                                                                           |                                                                  |

Case No.

## LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

Debtor(s)

(Continuation Sheet)

| (1)                                                                    | (2)                                                                                                                                                                      | (3)                                                                         | (4)                                                                                       | (5)                                                              |
|------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|------------------------------------------------------------------|
| Name of creditor and complete<br>mailing address including zip<br>code | Name, telephone number and complete<br>mailing address, including zip code, of<br>employee, agent, or department of creditor<br>familiar with claim who may be contacted | Nature of claim (trade<br>debt, bank loan,<br>government contract,<br>etc.) | Indicate if claim is<br>contingent,<br>unliquidated,<br>disputed, or subject<br>to setoff | Amount of claim [if<br>secured, also state<br>value of security] |
|                                                                        |                                                                                                                                                                          |                                                                             |                                                                                           |                                                                  |
|                                                                        |                                                                                                                                                                          |                                                                             |                                                                                           |                                                                  |
|                                                                        |                                                                                                                                                                          |                                                                             |                                                                                           |                                                                  |
|                                                                        |                                                                                                                                                                          |                                                                             |                                                                                           |                                                                  |
|                                                                        |                                                                                                                                                                          |                                                                             |                                                                                           |                                                                  |
|                                                                        |                                                                                                                                                                          |                                                                             |                                                                                           |                                                                  |
|                                                                        |                                                                                                                                                                          |                                                                             |                                                                                           |                                                                  |
|                                                                        |                                                                                                                                                                          |                                                                             |                                                                                           |                                                                  |
|                                                                        |                                                                                                                                                                          |                                                                             |                                                                                           |                                                                  |

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

I, the SENIOR MEMBER 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 December 2, 2010

Signature /s/ ERNEST COLEY, SR ERNEST COLEY, SR SENIOR MEMBER

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.

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PPS PROPERTIES, LLC

Debtor

| Case No. |  |
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11

Chapter\_\_\_\_\_

## 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<br>(YES/NO) | NO. OF<br>SHEETS | ASSETS            | LIABILITIES  | OTHER |
|------------------------------------------------------------------------------------|----------------------|------------------|-------------------|--------------|-------|
| A - Real Property                                                                  | Yes                  | 1                | 1,057,600.00      |              |       |
| B - Personal Property                                                              | Yes                  | 3                | 0.00              |              |       |
| C - Property Claimed as Exempt                                                     | No                   | 0                |                   |              |       |
| D - Creditors Holding Secured Claims                                               | Yes                  | 1                |                   | 1,231,913.81 |       |
| E - Creditors Holding Unsecured<br>Priority Claims (Total of Claims on Schedule E) | Yes                  | 3                |                   | 14,243.21    |       |
| F - Creditors Holding Unsecured<br>Nonpriority Claims                              | Yes                  | 1                |                   | 1,000.00     |       |
| G - Executory Contracts and<br>Unexpired Leases                                    | Yes                  | 1                |                   |              |       |
| H - Codebtors                                                                      | Yes                  | 1                |                   |              |       |
| I - Current Income of Individual<br>Debtor(s)                                      | No                   | 0                |                   |              | N/A   |
| J - Current Expenditures of Individual<br>Debtor(s)                                | No                   | 0                |                   |              | N/A   |
| Total Number of Sheets of ALL Schedu                                               | ıles                 | 11               |                   |              |       |
|                                                                                    | Te                   | otal Assets      | 1,057,600.00      |              |       |
|                                                                                    |                      |                  | Total Liabilities | 1,247,157.02 |       |

In re

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#### PPS PROPERTIES, LLC

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

#### State the following:

| Average Income (from Schedule I, Line 16)                                                     |  |
|-----------------------------------------------------------------------------------------------|--|
| Average Expenses (from Schedule J, Line 18)                                                   |  |
| Current Monthly Income (from Form 22A Line 12; OR,<br>Form 22B Line 11; OR, Form 22C Line 20) |  |

#### State the following:

| 1. Total from Schedule D, "UNSECURED PORTION, IF ANY"<br>column               |  |
|-------------------------------------------------------------------------------|--|
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column                |  |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO<br>PRIORITY, IF ANY" column |  |
| 4. Total from Schedule F                                                      |  |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4)                  |  |

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In re **PPS PROPERTIES, LLC** 

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, both, or the marital community 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<br>Interest in Property | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in<br>Property, without<br>Deducting any Secured<br>Claim or Exemption | Amount of<br>Secured Claim |
|------------------------------------------------------------------------|--------------------------------------------|---------------------------------------------|--------------------------------------------------------------------------------------------------------------|----------------------------|
| COMMERCIAL PROPERTY LOCATED<br>240 & 244 NOAH DR<br>FRANKLIN, TN 37064 | Fee Simple                                 | -                                           | 757,600.00                                                                                                   | 721,913.81                 |
| COMMERCIAL PROPERTY LOCATED<br>510 NOEL AVE<br>HOPKINSVILLE, KY        | Fee Simple                                 | -                                           | 300,000.00                                                                                                   | 510,000.00                 |

Sub-Total > **1,057,600.00** (Total of this page)

Total > 1,057,600.00

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In re **PPS PROPERTIES, LLC** 

Case No.

Debtor

## **SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

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

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

|     | Type of Property                                                                                                                                                                                                                            | N<br>O Description and Location of Property<br>E  | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|-----|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|---------------------------------------------|-----------------------------------------------------------------------------------------------------------|
| 1.  | Cash on hand                                                                                                                                                                                                                                | x                                                 |                                             |                                                                                                           |
| 2.  | Checking, savings or other financial<br>accounts, certificates of deposit, or<br>shares in banks, savings and loan,<br>thrift, building and loan, and<br>homestead associations, or credit<br>unions, brokerage houses, or<br>cooperatives. | BUSINESS CHECKING ACCOUNT WITH BANK OF<br>AMERICA | -                                           | 0.00                                                                                                      |
| 3.  | Security deposits with public<br>utilities, telephone companies,<br>landlords, and others.                                                                                                                                                  | x                                                 |                                             |                                                                                                           |
| 4.  | Household goods and furnishings,<br>including audio, video, and<br>computer equipment.                                                                                                                                                      | x                                                 |                                             |                                                                                                           |
| 5.  | Books, pictures and other art<br>objects, antiques, stamp, coin,<br>record, tape, compact disc, and<br>other collections or collectibles.                                                                                                   | x                                                 |                                             |                                                                                                           |
| 6.  | Wearing apparel.                                                                                                                                                                                                                            | x                                                 |                                             |                                                                                                           |
| 7.  | Furs and jewelry.                                                                                                                                                                                                                           | x                                                 |                                             |                                                                                                           |
| 8.  | Firearms and sports, photographic, and other hobby equipment.                                                                                                                                                                               | x                                                 |                                             |                                                                                                           |
| 9.  | Interests in insurance policies.<br>Name insurance company of each<br>policy and itemize surrender or<br>refund value of each.                                                                                                              | x                                                 |                                             |                                                                                                           |
| 10. | Annuities. Itemize and name each issuer.                                                                                                                                                                                                    | x                                                 |                                             |                                                                                                           |

0.00

**2** continuation sheets attached to the Schedule of Personal Property

**PPS PROPERTIES, LLC** In re

Case No.

Debtor

# SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

|     |                                                                                                                                                                                                                                                                 | N                |                                      | TT1                                         | C                                                                                                         |
|-----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|--------------------------------------|---------------------------------------------|-----------------------------------------------------------------------------------------------------------|
|     | Type of Property                                                                                                                                                                                                                                                | N<br>O<br>N<br>E | Description and Location of Property | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
| 11. | Interests in an education IRA as<br>defined in 26 U.S.C. § 530(b)(1) or<br>under a qualified State tuition plan<br>as defined in 26 U.S.C. § 529(b)(1).<br>Give particulars. (File separately the<br>record(s) of any such interest(s).<br>11 U.S.C. § 521(c).) | X                |                                      |                                             |                                                                                                           |
| 12. | Interests in IRA, ERISA, Keogh, or<br>other pension or profit sharing<br>plans. Give particulars.                                                                                                                                                               | x                |                                      |                                             |                                                                                                           |
| 13. | Stock and interests in incorporated<br>and unincorporated businesses.<br>Itemize.                                                                                                                                                                               | x                |                                      |                                             |                                                                                                           |
| 14. | Interests in partnerships or joint ventures. Itemize.                                                                                                                                                                                                           | x                |                                      |                                             |                                                                                                           |
| 15. | Government and corporate bonds<br>and other negotiable and<br>nonnegotiable instruments.                                                                                                                                                                        | X                |                                      |                                             |                                                                                                           |
| 16. | Accounts receivable.                                                                                                                                                                                                                                            | х                |                                      |                                             |                                                                                                           |
| 17. | Alimony, maintenance, support, and<br>property settlements to which the<br>debtor is or may be entitled. Give<br>particulars.                                                                                                                                   | X                |                                      |                                             |                                                                                                           |
| 18. | Other liquidated debts owed to debtor including tax refunds. Give particulars.                                                                                                                                                                                  | x                |                                      |                                             |                                                                                                           |
| 19. | Equitable or future interests, life<br>estates, and rights or powers<br>exercisable for the benefit of the<br>debtor other than those listed in<br>Schedule A - Real Property.                                                                                  | x                |                                      |                                             |                                                                                                           |
| 20. | Contingent and noncontingent<br>interests in estate of a decedent,<br>death benefit plan, life insurance<br>policy, or trust.                                                                                                                                   | x                |                                      |                                             |                                                                                                           |
| 21. | Other contingent and unliquidated<br>claims of every nature, including<br>tax refunds, counterclaims of the<br>debtor, and rights to setoff claims.<br>Give estimated value of each.                                                                            | x                |                                      |                                             |                                                                                                           |

Sheet <u>1</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

0.00

(Total of this page)

#### **PPS PROPERTIES, LLC**

Case No.

Debtor

## **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

|     | Type of Property                                                                                                                                                                                                                                                                                             | N<br>O<br>N<br>E | Description and Location of Property | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|-----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|--------------------------------------|---------------------------------------------|-----------------------------------------------------------------------------------------------------------|
| 22. | Patents, copyrights, and other intellectual property. Give particulars.                                                                                                                                                                                                                                      | X                |                                      |                                             |                                                                                                           |
| 23. | Licenses, franchises, and other general intangibles. Give particulars.                                                                                                                                                                                                                                       | х                |                                      |                                             |                                                                                                           |
| 24. | Customer lists or other compilations<br>containing personally identifiable<br>information (as defined in 11 U.S.C.<br>§ 101(41A)) provided to the debtor<br>by individuals in connection with<br>obtaining a product or service from<br>the debtor primarily for personal,<br>family, or household purposes. | Х                |                                      |                                             |                                                                                                           |
| 25. | Automobiles, trucks, trailers, and other vehicles and accessories.                                                                                                                                                                                                                                           | X                |                                      |                                             |                                                                                                           |
| 26. | Boats, motors, and accessories.                                                                                                                                                                                                                                                                              | Х                |                                      |                                             |                                                                                                           |
| 27. | Aircraft and accessories.                                                                                                                                                                                                                                                                                    | Х                |                                      |                                             |                                                                                                           |
| 28. | Office equipment, furnishings, and supplies.                                                                                                                                                                                                                                                                 | X                |                                      |                                             |                                                                                                           |
| 29. | Machinery, fixtures, equipment, and supplies used in business.                                                                                                                                                                                                                                               | X                |                                      |                                             |                                                                                                           |
| 30. | Inventory.                                                                                                                                                                                                                                                                                                   | Х                |                                      |                                             |                                                                                                           |
| 31. | Animals.                                                                                                                                                                                                                                                                                                     | Х                |                                      |                                             |                                                                                                           |
| 32. | Crops - growing or harvested. Give particulars.                                                                                                                                                                                                                                                              | X                |                                      |                                             |                                                                                                           |
| 33. | Farming equipment and implements.                                                                                                                                                                                                                                                                            | X                |                                      |                                             |                                                                                                           |
| 34. | Farm supplies, chemicals, and feed.                                                                                                                                                                                                                                                                          | Х                |                                      |                                             |                                                                                                           |
| 35. | Other personal property of any kind not already listed. Itemize.                                                                                                                                                                                                                                             | х                |                                      |                                             |                                                                                                           |

(Report also on Summary of Schedules)

#### **PPS PROPERTIES, LLC**

Case No.

Debtor

## **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.

other security interests. List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and 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. Check this box if debtor has no creditors holding secured claims to report on this Schedule D. 

| CREDITOR'S NAME<br>AND MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)<br>Account No. xxx5863<br>STERLING BANK<br>PO BOX 924009<br>Houston, TX 77292-4009 | CODEBTOR<br>X | н<br>К<br>Н | sband, Wife, Joint, or Community<br>DATE CLAIM WAS INCURRED,<br>NATURE OF LIEN, AND<br>DESCRIPTION AND VALUE<br>OF PROPERTY<br>SUBJECT TO LIEN<br>Mortgage<br>COMMERCIAL PROPERTY LOCATED<br>240 & 244 NOAH DR<br>FRANKLIN, TN 37064<br>Value \$ 757,600.00 | CONTINGENT     |      |   | AMOUNT OF<br>CLAIM<br>WITHOUT<br>DEDUCTING<br>VALUE OF<br>COLLATERAL<br>721,913.81 | UNSECURED<br>PORTION, IF<br>ANY<br>0.00 |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|------|---|------------------------------------------------------------------------------------|-----------------------------------------|
| Account No.                                                                                                                                                                                         | ┢             | ┢           |                                                                                                                                                                                                                                                             | $\square$      |      | + | 721,913.01                                                                         | 0.00                                    |
| STITES & HARBISON<br>401 COMMERCE ST<br>STE 800<br>Nashville, TN 37219                                                                                                                              |               |             | Representing:<br>STERLING BANK                                                                                                                                                                                                                              |                |      |   | Notice Only                                                                        |                                         |
|                                                                                                                                                                                                     |               | L           | Value \$                                                                                                                                                                                                                                                    |                |      |   |                                                                                    |                                         |
| Account No. xxx-xx8274<br>SYNOVUS SBA LENDING<br>PO BOX 1739<br>Fernandina Beach, FL 32035                                                                                                          | x             | -           | Mortgage<br>COMMERCIAL PROPERTY LOCATED<br>510 NOEL AVE<br>HOPKINSVILLE, KY                                                                                                                                                                                 |                |      |   |                                                                                    |                                         |
|                                                                                                                                                                                                     |               |             | Value \$ 300,000.00                                                                                                                                                                                                                                         |                |      |   | 510,000.00                                                                         | 210,000.00                              |
| Account No.                                                                                                                                                                                         |               |             | Value \$                                                                                                                                                                                                                                                    |                |      |   |                                                                                    |                                         |
| <b>0</b> continuation sheets attached                                                                                                                                                               |               |             | S<br>(Total of t                                                                                                                                                                                                                                            | Subte<br>his p |      | , | 1,231,913.81                                                                       | 210,000.00                              |
|                                                                                                                                                                                                     |               |             |                                                                                                                                                                                                                                                             | Т              | otal |   | 1.231.913.81                                                                       | 210.000.00                              |

(Report on Summary of Schedules)

#### **PPS PROPERTIES, LLC**

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, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and 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 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 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 trustee 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 \$11,725\* 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 \$5,775\* 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 \$2,600\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or 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).

\* Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

#### **2** continuation sheets attached

**PPS PROPERTIES, LLC** In re

Debtor

Case No.

## **SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

(Continuation Sheet)

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

| TYPE OF PRIORITY                                                                                            |                 |                        |              |           |                       |                  |                    | 7                                                                               |
|-------------------------------------------------------------------------------------------------------------|-----------------|------------------------|--------------|-----------|-----------------------|------------------|--------------------|---------------------------------------------------------------------------------|
| CREDITOR'S NAME,<br>AND MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions.) | C O D E B T O R | Hu<br>H<br>V<br>J<br>C |              | CONTINGEN |                       | U<br>T<br>E      | AMOUNT<br>OF CLAIM | AMOUNT NOT<br>ENTITLED TO<br>PRIORITY, IF ANY<br>AMOUN<br>ENTITLED T<br>PRIORIT |
| Account No. xxxxx0001                                                                                       |                 |                        | 510 NOEL AVE | Τ         | D<br>A<br>T<br>E<br>D |                  |                    |                                                                                 |
| CHRISTIAN COUNTY SHERIFF<br>216 W 7TH STREET<br>Hopkinsville, KY 42240                                      |                 | -                      |              |           |                       |                  | 2,160.00           | 2,160.00                                                                        |
| Account No. xxx9662                                                                                         |                 |                        | 244 NOAH DR  | ┢         |                       | $\square$        | 2,100.00           | 2,100.00                                                                        |
| CITY OF FRANKLIN<br>PO BOX 705<br>Franklin, TN 37065                                                        |                 | -                      |              |           |                       |                  |                    | 0.00                                                                            |
|                                                                                                             |                 |                        |              |           |                       |                  | 1,315.00           | 1,315.0                                                                         |
| Account No. <b>xxx9663</b><br>CITY OF FRANKLIN<br>PO BOX 705<br>Franklin, TN 37065                          |                 | -                      | 240 NOAH DR  |           |                       |                  | 1.00               | 0.00                                                                            |
| Account No. <b>xxx9299</b><br>CITY OF FRANKLIN<br>PO BOX 705<br>Franklin, TN 37065                          |                 | -                      | 244 NOAH DR  |           |                       |                  | 1,315.00           | 0.00                                                                            |
| Account No. xxx9300                                                                                         |                 | +                      | 240 NOAH DR  | ┢         |                       | $\left  \right $ | 1,315.00           | 1,315.00                                                                        |
| CITY OF FRANKLIN<br>PO BOX 705<br>Franklin, TN 37065                                                        |                 | -                      |              |           |                       |                  | 1.00               | 0.00                                                                            |
| Sheet <u>1</u> of <u>2</u> continuation sheets                                                              | attache         | d te                   | 1<br>>       | Subt      | ota                   | ıl               |                    | 0.00                                                                            |
| Schedule of Creditors Holding Unsecured                                                                     |                 |                        |              | his       | pag                   | ge)              | 4,792.00           | 4,792.0                                                                         |

In re **PPS PROPERTIES, LLC** 

Case No.\_\_\_\_\_

Debtor

## SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

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

| CREDITOR'S NAME,<br>AND MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions.)       Image: Community of the community |                                                                            | 7           | TYPE OF PRIORITY |          |   |              |   |     |                                                        |                                           |               |                                                                  |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|-------------|------------------|----------|---|--------------|---|-----|--------------------------------------------------------|-------------------------------------------|---------------|------------------------------------------------------------------|--|
| INCLUDING 2P CODE:<br>AND ACCOURT NUMBER<br>(See instructions.)       i       AND CONSIDERATION FOR CLAIM       i       OF CLAIM       Image: Construction constructino construction construction construction constr                                                  | UNT NOT                                                                    | 1           |                  |          |   |              |   |     |                                                        |                                           |               |                                                                  |  |
| CITY OF HOPKINSVILLE PROPERTY<br>TAX<br>PO BOX 707<br>Hopkinsville, KY 42241       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | AMOUNT<br>ENTITLED TO<br>RITY, IF ANY<br>AMOUNT<br>ENTITLED TO<br>PRIORITY | <b>ENTI</b> |                  |          | T | Q<br>  U<br> |   |     | DATE CLAIM WAS INCURRED<br>AND CONSIDERATION FOR CLAIM | O<br>D<br>E<br>B<br>W<br>T<br>O<br>R<br>C | ESS<br>DE,    | AND MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER |  |
| CITY OF HOPKINSVILLE PROPERTY<br>TAX<br>PO BOX 707<br>Hopkinsville, KY 42241       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                            |             |                  |          |   | T<br>E<br>D  | т |     | 510 NOEL AVE                                           |                                           |               | Account No. <b>XXXXX0001</b>                                     |  |
| WILLIAMSON COUNTY TRUSTEE<br>PO BOX 648<br>Franklin, TN 37065       0.00         Account No. XXXX X9288       244 NOAH DR         WILLIAMSON COUNTY TRUSTEE<br>PO BOX 648<br>Franklin, TN 37065       0.00         Franklin, TN 37065       .         Account No.       .         Account No.       .         Account No.       .         Account No.       .         .       .         .       .         .       .         .       .         .       .         .       .         .       .         .       .         .       .         .       .         .       .         .       .         .       .         .       .         .       .         .       .         .       .         .       .         .       .         .       .         .       .         .       .         .       .         .       .         .       .         .       .                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 2,184.18                                                                   | 0.00        | 2,184.18         | -        |   |              |   |     |                                                        | _                                         | OPERTY        | ТАХ<br>РО ВОХ 707                                                |  |
| PO BOX 648<br>Franklin, TN 37065       0.00         Account No. XXXX x9288       244 NOAH DR         WILLIAMSON COUNTY TRUSTEE<br>PO BOX 648<br>Franklin, TN 37065       244 NOAH DR         Account No.       1         Franklin, TN 37065       1         Account No.       1         Image: Account No.       1 <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>240 NOAH DR</td> <td></td> <td></td> <td>Account No. XXXX X9289</td>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                            |             |                  |          |   |              |   |     | 240 NOAH DR                                            |                                           |               | Account No. XXXX X9289                                           |  |
| Account No. XXXX X9288         244 NOAH DR         0         0         0.00           WILLIAMSON COUNTY TRUSTEE<br>PO BOX 648<br>Franklin, TN 37065         -         -         0.00         -         -         0.00           Account No.         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                            | 0.00        |                  |          |   |              |   |     |                                                        | _                                         | STEE          | PO BOX 648                                                       |  |
| WILLIAMSON COUNTY TRUSTEE       0.00         PO BOX 648       7,262.67         Franklin, TN 37065       7         Account No.       1         Image: Contract of the second se                                                                                                                                               | 4.36                                                                       |             | 4.36             |          |   |              |   |     |                                                        |                                           |               |                                                                  |  |
| PO BOX 648     0.00       Franklin, TN 37065     -       Account No.     -       Account No.     -                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                            |             |                  |          |   |              |   |     | 244 NOAH DR                                            |                                           |               | Account No. <b>XXXX X9288</b>                                    |  |
| Account No.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                            | 0.00        |                  |          |   |              |   |     |                                                        | _                                         | STEE          | PO BOX 648                                                       |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 7,262.67                                                                   |             | 7,262.67         |          |   |              |   |     |                                                        |                                           |               |                                                                  |  |
| Account No.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                            |             |                  |          |   |              |   |     |                                                        |                                           |               | Account No.                                                      |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                            |             |                  |          |   |              |   | 1   |                                                        |                                           |               | Account No.                                                      |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                            |             |                  |          |   |              |   |     |                                                        |                                           |               |                                                                  |  |
| Sheet 2 of 2 continuation sheets attached to     Subtotal                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                            | 0.00        |                  |          |   |              |   |     | to                                                     | hed to                                    | on sheets att | Sheet <b>2</b> of <b>2</b> continuation sh                       |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 9,451.21                                                                   |             | 9,451.21         | <u> </u> |   |              |   | thi | Claims (Total of                                       | ity Cl                                    | Insecured Pri | Schedule of Creditors Holding Unsecu                             |  |
| Total         0.00           (Report on Summary of Schedules)         14,243.21         14                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 14,243.21                                                                  | 0.00        | 14,243.21        |          |   |              |   | Sch | (Report on Summary of S                                |                                           |               |                                                                  |  |

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**PPS PROPERTIES, LLC** 

Case No.

Debtor

## **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, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and 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, 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,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.) | CODEBTOR | C<br>M<br>H<br>H | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. | CONT-NGEN   | UNL QU L DATED | D<br>I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT OF CLAIM |
|---------------------------------------------------------------------------------------------------------------|----------|------------------|-----------------------------------------------------------------------------------------------------|-------------|----------------|--------------------------------------|-----------------|
| Account No. xxxx6551<br>COLEY HAWKINS, INC<br>12790 EL CAMINO REAL<br>SUITE 130<br>San Diego, CA 92130        |          | -                |                                                                                                     | Т           | TED            |                                      | 1,000.00        |
| Account No.                                                                                                   |          |                  |                                                                                                     |             |                |                                      |                 |
| Account No.                                                                                                   |          |                  |                                                                                                     |             |                |                                      |                 |
| Account No.                                                                                                   |          |                  |                                                                                                     |             |                |                                      |                 |
| <b></b> continuation sheets attached                                                                          |          | _                | (Total o                                                                                            | Sub<br>this |                |                                      | 1,000.00        |
|                                                                                                               |          |                  | (Report on Summary of                                                                               |             | Tot<br>dul     |                                      | 1,000.00        |

0

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#### **PPS PROPERTIES, LLC**

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, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and 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.

### **PPS PROPERTIES. LLC**

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, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

**BETSY COLEY** 702 BRAEMERE DR Franklin, TN 37064

**BETSY COLEY** 702 BRAEMERE DR Franklin, TN 37064

ERNEST COLEY, JR 702 BRAEMERE DR Franklin, TN 37064

ERNEST COLEY, JR 702 BRAEMERE DR Franklin, TN 37064

**ERNEST COLEY, SR** PO BOX 682351 Franklin, TN 37068

**ERNEST COLEY, SR** PO BOX 682351 Franklin, TN 37068

SHARON COLEY 274 NOAH DR Franklin, TN 37064

SHARON COLEY 274 NOAH DR Franklin, TN 37064 STERLING BANK

NAME AND ADDRESS OF CREDITOR

PO BOX 924009 Houston, TX 77292-4009

SYNOVUS SBA LENDING **PO BOX 1739** Fernandina Beach, FL 32035

STERLING BANK PO BOX 924009 Houston, TX 77292-4009

SYNOVUS SBA LENDING PO BOX 1739 Fernandina Beach, FL 32035

STERLING BANK PO BOX 924009 Houston, TX 77292-4009

SYNOVUS SBA LENDING **PO BOX 1739** Fernandina Beach, FL 32035

STERLING BANK PO BOX 924009 Houston, TX 77292-4009

SYNOVUS SBA LENDING **PO BOX 1739** Fernandina Beach, FL 32035

| In re | PPS PROPERTIES, LLC                                        |                                      | Case            | No.            |                 |                 |
|-------|------------------------------------------------------------|--------------------------------------|-----------------|----------------|-----------------|-----------------|
|       |                                                            | Debtor(s)                            | Chap            | oter 11        | 1               |                 |
|       | BUSINESS I                                                 | NCOME AND EXP                        | PENSES          |                |                 |                 |
| F     | INANCIAL REVIEW OF THE DEBTOR'S BUS                        | INESS (NOTE: ONLY INCLUDE            | E information d | irectly relate | ed to the busin | ess operation.) |
|       | A - GROSS BUSINESS INCOME FOR PREVIO                       |                                      | -               | •              |                 | <b>-</b>        |
|       | 1. Gross Income For 12 Months Prior to Filing:             |                                      | \$              | 74,338         | 8.66            |                 |
| PART  | B - ESTIMATED AVERAGE FUTURE GROSS                         | MONTHLY INCOME:                      |                 | ,              |                 |                 |
|       | 2. Gross Monthly Income                                    |                                      |                 |                | \$              | 6,000.00        |
| PART  | C - ESTIMATED FUTURE MONTHLY EXPEN                         | SES:                                 |                 |                |                 |                 |
|       | 3. Net Employee Payroll (Other Than Debtor)                |                                      | \$              | (              | 0.00            |                 |
|       | 4. Payroll Taxes                                           |                                      |                 |                | 0.00            |                 |
|       | 5. Unemployment Taxes                                      |                                      |                 |                | 0.00            |                 |
|       | 6. Worker's Compensation                                   |                                      |                 |                | 0.00            |                 |
|       | 7. Other Taxes                                             |                                      |                 | (              | 0.00            |                 |
|       | 8. Inventory Purchases (Including raw materials)           |                                      |                 | (              | 0.00            |                 |
|       | 9. Purchase of Feed/Fertilizer/Seed/Spray                  |                                      |                 | (              | 0.00            |                 |
|       | 10. Rent (Other than debtor's principal residence)         |                                      |                 | (              | 0.00            |                 |
|       | 11. Utilities                                              |                                      |                 | (              | 0.00            |                 |
|       | 12. Office Expenses and Supplies                           |                                      |                 | (              | 0.00            |                 |
|       | 13. Repairs and Maintenance                                |                                      |                 | (              | 0.00            |                 |
|       | 14. Vehicle Expenses                                       |                                      |                 | (              | 0.00            |                 |
|       | 15. Travel and Entertainment                               |                                      |                 | (              | 0.00            |                 |
|       | 16. Equipment Rental and Leases                            |                                      |                 | (              | 0.00            |                 |
|       | 17. Legal/Accounting/Other Professional Fees               |                                      |                 | (              | 0.00            |                 |
|       | 18. Insurance                                              |                                      |                 | (              | 0.00            |                 |
|       | 19. Employee Benefits (e.g., pension, medical, etc.)       |                                      |                 |                | 0.00            |                 |
|       | 20. Payments to Be Made Directly By Debtor to Secured Crea | ditors For Pre-Petition Business Deb | ots (Specify):  |                |                 |                 |
|       | DESCRIPTION                                                | ТОТ                                  | AL              |                |                 |                 |
|       | 21. Other (Specify):                                       |                                      |                 |                |                 |                 |
|       | DESCRIPTION                                                | ТОТ                                  | AL              |                |                 |                 |
|       | 22. Total Monthly Expenses (Add items 3-21)                |                                      |                 |                | \$              | 0.00            |
| PART  | D - ESTIMATED AVERAGE NET MONTHLY                          | INCOME:                              |                 |                |                 |                 |
|       | 23. AVERAGE NET MONTHLY INCOME (Subtract item 2            | 2 from item 2)                       |                 |                | \$              | 6,000.00        |

Debtor(s)

In re **PPS PROPERTIES, LLC** 

Case No. Chapter

11

## **DECLARATION CONCERNING DEBTOR'S SCHEDULES**

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the SENIOR MEMBER of the corporation named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 13 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date December 2, 2010

Signature /s/ ERNEST COLEY, SR ERNEST COLEY, SR SENIOR MEMBER

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.

In re **PPS PROPERTIES, LLC** 

Debtor(s)

Case No. Chapter

11

## STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

*"Insider."* The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

#### 1. Income from employment or operation of business

None State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| AMOUNT      | SOURCE                           |
|-------------|----------------------------------|
| \$60,738.66 | 2010 APPROX GROSS INCOME         |
| \$80,700.00 | 2009 GROSS INCOME PER TAX RETURN |
| \$92,550.00 | 2008 GROSS INCOME PER TAX RETURN |

#### 2. Income other than from employment or operation of business

None State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

#### 3. Payments to creditors

## None Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts.* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS | DATES OF | AMOUNT PAID | AMOUNT STILL |
|------------------|----------|-------------|--------------|
| OF CREDITOR      | PAYMENTS |             | OWING        |
| OF CREDITOR      | FAIWENIS |             | Owing        |

None b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,850<sup>\*</sup>. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF CREDITOR<br>STERLING BANK<br>PO BOX 924009 | DATES OF<br>PAYMENTS/<br>TRANSFERS<br><b>SEPT &amp; NOV 2010</b> | AMOUNT<br>PAID OR<br>VALUE OF<br>TRANSFERS<br><b>\$12,000.00</b> | AMOUNT STILL<br>OWING<br><b>\$721,913.81</b> |
|----------------------------------------------------------------|------------------------------------------------------------------|------------------------------------------------------------------|----------------------------------------------|
| Houston, TX 77292-4009                                         |                                                                  |                                                                  |                                              |

None c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF CREDITOR AND<br>RELATIONSHIP TO DEBTOR | DATE OF PAYMENT | AMOUNT PAID | AMOUNT STILL<br>OWING |
|------------------------------------------------------------|-----------------|-------------|-----------------------|
|                                                            |                 |             |                       |

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

None a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| CAPTION OF SUIT | NATURE OF  | COURT OR AGENCY | STATUS OR   |
|-----------------|------------|-----------------|-------------|
| AND CASE NUMBER | PROCEEDING | AND LOCATION    | DISPOSITION |

None b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

\* Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

#### 5. Repossessions, foreclosures and returns

None List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF

DATE OF REPOSSESSION,

| CREDIT<br>STERLII<br>PO BOX | AND ADDRESS OF<br>TOR OR SELLER<br>NG BANK<br>( 924009<br>n, TX 77292-4009 | FORECLOSURE SALE,<br>TRANSFER OR RETURN<br>12/6/2010 @ 10:00 AM                                                                                                                             | DESCRIPTION A<br>PROPE<br>COMMERCIAL F<br>240 & 244 NOAF<br>FRANKLIN, TN 3<br>\$757,600.00 | ERTY<br>PROPERTY LOCATED<br>1 DR                                           |
|-----------------------------|----------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|
|                             | 6. Assignments and receiverships                                           | 3                                                                                                                                                                                           |                                                                                            |                                                                            |
| None                        | this case. (Married debtors filing un                                      | erty for the benefit of creditors made with<br>der chapter 12 or chapter 13 must include<br>buses are separated and a joint petition is                                                     | le any assignment by                                                                       |                                                                            |
| NAME A                      | AND ADDRESS OF ASSIGNEE                                                    | DATE OF<br>ASSIGNMENT                                                                                                                                                                       | TERMS OF ASSI                                                                              | GNMENT OR SETTLEMENT                                                       |
| None                        | preceding the commencement of th                                           | in the hands of a custodian, receiver, or c<br>is case. (Married debtors filing under cha<br>whether or not a joint petition is filed, unl                                                  | apter 12 or chapter 13                                                                     | must include information concerning                                        |
|                             | AND ADDRESS<br>USTODIAN                                                    | NAME AND LOCATION<br>OF COURT<br>CASE TITLE & NUMBER                                                                                                                                        | DATE OF<br>ORDER                                                                           | DESCRIPTION AND VALUE OF<br>PROPERTY                                       |
|                             | 7. Gifts                                                                   |                                                                                                                                                                                             |                                                                                            |                                                                            |
| None                        | and usual gifts to family members a aggregating less than \$100 per reci   | ions made within <b>one year</b> immediately p<br>aggregating less than \$200 in value per in<br>pient. (Married debtors filing under chap<br>ot a joint petition is filed, unless the spou | dividual family mem<br>ter 12 or chapter 13 n                                              | ber and charitable contributions<br>nust include gifts or contributions by |
|                             | E AND ADDRESS OF<br>I OR ORGANIZATION                                      | RELATIONSHIP TO<br>DEBTOR, IF ANY                                                                                                                                                           | DATE OF GIFT                                                                               | DESCRIPTION AND<br>VALUE OF GIFT                                           |
|                             | 8. Losses                                                                  |                                                                                                                                                                                             |                                                                                            |                                                                            |
| None                        | since the commencement of this c                                           | casualty or gambling within <b>one year</b> in <b>ase.</b> (Married debtors filing under chapte ion is filed, unless the spouses are separa                                                 | r 12 or chapter 13 mu                                                                      | ist include losses by either or both                                       |
|                             | PTION AND VALUE<br>PROPERTY                                                | DESCRIPTION OF C<br>LOSS WAS COVERE<br>BY INSURANCE                                                                                                                                         |                                                                                            | N PART                                                                     |

AMOUNT OF MONEY

#### 9. Payments related to debt counseling or bankruptcy

None List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

DATE OF PAYMENT,

| OF I<br>LEFKOV<br>618 CHU | ND ADDRESS<br>PAYEE<br>/ITZ & LEFKOVITZ<br>JRCH ST., #410<br>LLE, TN 37219                                               | NAME OF PAYOR IF OTHER<br>THAN DEBTOR<br>11/29/2010                                                                                                                                                                     | OR DESCRIPTION AND VALUE<br>OF PROPERTY<br>\$6,000.00 + CC                                                                                                                                                                                                                         |
|---------------------------|--------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                           | 10. Other transfers                                                                                                      |                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                    |
| None                      | a. List all other property, other the transferred either absolutely or as                                                | 13 must include transfers by either or both spous                                                                                                                                                                       | the business or financial affairs of the debtor,<br>g the commencement of this case. (Married debtors<br>ses whether or not a joint petition is filed, unless the                                                                                                                  |
|                           | ND ADDRESS OF TRANSFEREE<br>ELATIONSHIP TO DEBTOR                                                                        | , DES<br>DATE                                                                                                                                                                                                           | SCRIBE PROPERTY TRANSFERRED<br>AND VALUE RECEIVED                                                                                                                                                                                                                                  |
| None                      | b. List all property transferred by trust or similar device of which the                                                 |                                                                                                                                                                                                                         | ing the commencement of this case to a self-settled                                                                                                                                                                                                                                |
| NAME O<br>DEVICE          | F TRUST OR OTHER                                                                                                         | DATE(S) OF VA                                                                                                                                                                                                           | OUNT OF MONEY OR DESCRIPTION AND<br>LUE OF PROPERTY OR DEBTOR'S INTEREST<br>PROPERTY                                                                                                                                                                                               |
|                           | 11. Closed financial accounts                                                                                            |                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                    |
| None                      | otherwise transferred within <b>one y</b><br>financial accounts, certificates of c<br>cooperatives, associations, broker | <b>rear</b> immediately preceding the commencement of<br>deposit, or other instruments; shares and share ac<br>age houses and other financial institutions. (Mark<br>ecounts or instruments held by or for either or bo | e benefit of the debtor which were closed, sold, or<br>of this case. Include checking, savings, or other<br>counts held in banks, credit unions, pension funds,<br>ried debtors filing under chapter 12 or chapter 13 must<br>th spouses whether or not a joint petition is filed, |
| NAME A                    | ND ADDRESS OF INSTITUTION                                                                                                | TYPE OF ACCOUNT, LAST<br>DIGITS OF ACCOUNT NUM<br>AND AMOUNT OF FINAL BA                                                                                                                                                | AMOUNT AND DATE OF SALE                                                                                                                                                                                                                                                            |
|                           | 12. Safe deposit boxes                                                                                                   |                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                    |
| None                      | immediately preceding the comme                                                                                          | encement of this case. (Married debtors filing und                                                                                                                                                                      | curities, cash, or other valuables within <b>one year</b><br>der chapter 12 or chapter 13 must include boxes or<br>s the spouses are separated and a joint petition is not                                                                                                         |
|                           | ND ADDRESS OF BANK<br>THER DEPOSITORY                                                                                    | of most with access                                                                                                                                                                                                     | ESCRIPTION DATE OF TRANSFER OR<br>F CONTENTS SURRENDER, IF ANY                                                                                                                                                                                                                     |
|                           | 13. Setoffs                                                                                                              |                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                    |
| None                      | commencement of this case. (Mar                                                                                          | or, including a bank, against a debt or deposit of<br>ried debtors filing under chapter 12 or chapter 13<br>ition is filed, unless the spouses are separated and                                                        | 3 must include information concerning either or both                                                                                                                                                                                                                               |
| NAME A                    | ND ADDRESS OF CREDITOR                                                                                                   | DATE OF SETOFF                                                                                                                                                                                                          | AMOUNT OF SETOFF                                                                                                                                                                                                                                                                   |
|                           |                                                                                                                          |                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                    |

14. Property held for another person

List all property owned by another person that the debtor holds or controls.

None

| NAME A  | AND ADDRESS OF OWNER                                                                    | DESCRIPTION AND VALUE OF PR                                                                                                                                | OPERTY LOCAT                                          | ION OF PROPERTY                                                                |
|---------|-----------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|--------------------------------------------------------------------------------|
|         | 15. Prior address of debto                                                              | r                                                                                                                                                          |                                                       |                                                                                |
| None    | If the debtor has moved wit<br>occupied during that period<br>address of either spouse. | hin <b>three years</b> immediately preceding the co<br>and vacated prior to the commencement of th                                                         | mmencement of this cas<br>is case. If a joint petitic | se, list all premises which the debtor<br>n is filed, report also any separate |
| ADDRES  | SS                                                                                      | NAME USED                                                                                                                                                  |                                                       | DATES OF OCCUPANCY                                                             |
|         | 16. Spouses and Former S                                                                | pouses                                                                                                                                                     |                                                       |                                                                                |
| None    | Louisiana, Nevada, New M                                                                | led in a community property state, commonwe<br>exico, Puerto Rico, Texas, Washington, or Wi<br>identify the name of the debtor's spouse and<br>te.         | isconsin) within eight y                              | ears immediately preceding the                                                 |
| NAME    |                                                                                         |                                                                                                                                                            |                                                       |                                                                                |
|         | 17. Environmental Inform                                                                | ation.                                                                                                                                                     |                                                       |                                                                                |
|         | For the purpose of this ques                                                            | tion, the following definitions apply:                                                                                                                     |                                                       |                                                                                |
|         | or toxic substances, wastes                                                             | s any federal, state, or local statute or regulati<br>or material into the air, land, soil, surface wate<br>ating the cleanup of these substances, wastes, | er, groundwater, or othe                              |                                                                                |
|         |                                                                                         | ion, facility, or property as defined under any<br>the debtor, including, but not limited to, dispo                                                        |                                                       | hether or not presently or formerly                                            |
|         |                                                                                         | means anything defined as a hazardous waste,<br>ant or similar term under an Environmental La                                                              |                                                       | oxic substance, hazardous material,                                            |
| None    |                                                                                         | s of every site for which the debtor has receive<br>r in violation of an Environmental Law. Indic                                                          |                                                       |                                                                                |
| SITE NA | ME AND ADDRESS                                                                          | NAME AND ADDRESS OF<br>GOVERNMENTAL UNIT                                                                                                                   | DATE OF<br>NOTICE                                     | ENVIRONMENTAL<br>LAW                                                           |
| None    |                                                                                         | s of every site for which the debtor provided r<br>nmental unit to which the notice was sent and                                                           |                                                       | l unit of a release of Hazardous                                               |
| SITE NA | ME AND ADDRESS                                                                          | NAME AND ADDRESS OF<br>GOVERNMENTAL UNIT                                                                                                                   | DATE OF<br>NOTICE                                     | ENVIRONMENTAL<br>LAW                                                           |
| None    |                                                                                         | strative proceedings, including settlements or<br>Indicate the name and address of the government                                                          |                                                       |                                                                                |
|         | AND ADDRESS OF<br>NMENTAL UNIT                                                          | DOCKET NUMBER                                                                                                                                              |                                                       | STATUS OR DISPOSITION                                                          |

#### 18. Nature, location and name of business

None a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

*If the debtor is a partnership*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

*If the debtor is a corporation*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

|                        | LAST FOUR DIGITS OF<br>SOCIAL-SECURITY OR<br>OTHER INDIVIDUAL<br>TAXPAYER-LD. NO. |                                     |                     | BEGINNING AND    |
|------------------------|-----------------------------------------------------------------------------------|-------------------------------------|---------------------|------------------|
| NAME                   | (ITIN)/ COMPLETE EIN                                                              | ADDRESS                             | NATURE OF BUSINESS  | ENDING DATES     |
| PPS PROPERTIES,<br>LLC | 20-8415046                                                                        | PO BOX 680007<br>Franklin, TN 37068 | REAL ESTATE LEASING | 9/1/2006-PRESENT |

None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME

ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

#### 19. Books, records and financial statements

None a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS COLEYHAWKINS, INC 12790 EL CAMINO REAL STE 130 San Diego, CA 92130 DATES SERVICES RENDERED 2006- PRESENT TAXES ONLY

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME

NAME

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

ADDRESS

ADDRESS

DATES SERVICES RENDERED

| ND ADDRESS               | DATE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|--------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 20. Inventories          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                          | e last two inventories taken of your property, the name of the pert and basis of each inventory.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| INVENTORY                | INVENTORY SUPERVISOR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| b. List the name and     | address of the person having possession of the records of each o                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| INVENTORY                | NAME AND ADDRESSE<br>RECORDS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| 21. Current Partne       | rs, Officers, Directors and Shareholders                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| a. If the debtor is a pa | artnership, list the nature and percentage of partnership interest of                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| ND ADDRESS               | NATURE OF INTEREST                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|                          | proportion, list all officers and directors of the corporation, and exercent or more of the voting or equity securities of the corporation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                          | <ul> <li>a. List the dates of th and the dollar amoun</li> <li>FINVENTORY</li> <li>b. List the name and</li> <li>FINVENTORY</li> <li>21. Current Partne</li> <li>a. If the debtor is a partne</li> <li>ND ADDRESS</li> <li>b. If the debtor is a compared by t</li></ul> |

| Franklin | n, TN 37068                                                                                                                            |                                    |                                                              |  |  |
|----------|----------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|--------------------------------------------------------------|--|--|
| 702 BR   | T COLEY, JR<br>AEMERE DR<br>n, TN 37064                                                                                                | MEMBER                             | 25% OWNERSHIP                                                |  |  |
|          | COLEY<br>AEMERE DR<br>n, TN 37064                                                                                                      | MEMBER                             | 25% OWNERSHIP                                                |  |  |
| 274 NO   | N COLEY<br>AH DR<br>n, TN 37064                                                                                                        | MEMBER                             | 25% OWNERSHIP                                                |  |  |
|          | 22 . Former partners, of                                                                                                               | ficers, directors and shareholders |                                                              |  |  |
| None     | a. If the debtor is a partne commencement of this ca                                                                                   | 1 1                                | partnership within <b>one year</b> immediately preceding the |  |  |
| NAME     |                                                                                                                                        | ADDRESS                            | DATE OF WITHDRAWAL                                           |  |  |
| None     | b. If the design is a corporation, list an officers, of another is a most relationship with the corporation terminated within one year |                                    |                                                              |  |  |
| NAME A   | AND ADDRESS                                                                                                                            | TITLE                              | DATE OF TERMINATION                                          |  |  |

#### DATE ISSUED

| nventories taker<br>of each invento |                                                                                         | on who supervised the taking of each inventory                      |
|-------------------------------------|-----------------------------------------------------------------------------------------|---------------------------------------------------------------------|
| VENTORY SU                          | JPERVISOR                                                                               | DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)    |
| he person havin                     | ng possession of the records of each of the                                             | he two inventories reported in a., above.                           |
|                                     | NAME AND ADDRESSES<br>RECORDS                                                           | OF CUSTODIAN OF INVENTORY                                           |
| s, Directors and                    | d Shareholders                                                                          |                                                                     |
| list the nature a                   | nd percentage of partnership interest of                                                | each member of the partnership.                                     |
|                                     | NATURE OF INTEREST                                                                      | PERCENTAGE OF INTEREST                                              |
|                                     | and directors of the corporation, and eac<br>ag or equity securities of the corporation | ch stockholder who directly or indirectly owns,                     |
|                                     | TITLE<br>MEMBER                                                                         | NATURE AND PERCENTAGE<br>OF STOCK OWNERSHIP<br><b>25% OWNERSHIP</b> |
|                                     | MEMBER                                                                                  | 25% OWNERSHIP                                                       |
|                                     | MEMBER                                                                                  | 25% OWNERSHIP                                                       |
|                                     | MEMBER                                                                                  | 25% OWNERSHIP                                                       |
|                                     |                                                                                         |                                                                     |

#### 23. Withdrawals from a partnership or distributions by a corporation

None If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

#### 24. Tax Consolidation Group.

None If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

#### NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

#### 25. Pension Funds.

None If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

#### TAXPAYER IDENTIFICATION NUMBER (EIN)

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

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct to the best of my knowledge, information and belief.

Date December 2, 2010

Signature

Ire /s/ ERNEST COLEY, SR ERNEST COLEY, SR SENIOR MEMBER

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

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

In re

PPS PROPERTIES, LLC

Debtor

| Case No. |  |  |
|----------|--|--|
|          |  |  |
|          |  |  |

11

Chapter\_\_\_\_\_

## LIST OF EQUITY SECURITY HOLDERS

Following is the list of the Debtor's equity security holders which is prepared in accordance with Rule 1007(a)(3) for filing in this chapter 11 case.

| Name and last known address<br>or place of business of holder | Security<br>Class | Number<br>of Securities | Kind of<br>Interest |
|---------------------------------------------------------------|-------------------|-------------------------|---------------------|
| BETSY COLEY<br>702 BRAEMERE DR<br>Franklin, TN 37064          | MEMBER            |                         | 25% OWNERSHIP       |
| ERNEST COLEY, JR<br>702 BRAEMERE DR<br>Franklin, TN 37064     | MEMBER            |                         | 25% OWNERSHIP       |
| ERNEST COLEY, SR<br>PO BOX 682351<br>Franklin, TN 37068       | SENIOR MEMBE      | R                       | 25% OWNERSHIP       |
| SHARON COLEY<br>274 NOAH DR<br>Franklin, TN 37064             | MEMBER            |                         | 25% OWNERSHIP       |

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

I, the SENIOR MEMBER of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date December 2, 2010

Signature /s/ ERNEST COLEY, SR ERNEST COLEY, SR SENIOR MEMBER

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.

In re **PPS PROPERTIES, LLC** 

Debtor(s)

Case No. Chapter

11

## **VERIFICATION OF CREDITOR MATRIX**

I, the SENIOR MEMBER of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true

and correct to the best of my knowledge.

Date: December 2, 2010

/s/ ERNEST COLEY, SR ERNEST COLEY, SR/SENIOR MEMBER Signer/Title PPS PROPERTIES, LLC PO BOX 680007 FRANKLIN TN 37068

.

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

BETSY COLEY 702 BRAEMERE DR FRANKLIN TN 37064

CHRISTIAN COUNTY SHERIFF 216 W 7TH STREET HOPKINSVILLE KY 42240 PPS PROPERTIES, LLC -STERLING BANK PO BOX 924009 HOUSTON TX 77292-4009

STITES & HARBISON 401 COMMERCE ST STE 800 NASHVILLE TN 37219

SYNOVUS SBA LENDING PO BOX 1739 FERNANDINA BEACH FL 32035

WILLIAMSON COUNTY TRUSTEE PO BOX 648 FRANKLIN TN 37065

CITY OF FRANKLIN PO BOX 705 FRANKLIN TN 37065

CITY OF HOPKINSVILLE PROPERTY TAX PO BOX 707 HOPKINSVILLE KY 42241

COLEY HAWKINS, INC 12790 EL CAMINO REAL SUITE 130 SAN DIEGO CA 92130

ERNEST COLEY, JR 702 BRAEMERE DR FRANKLIN TN 37064

ERNEST COLEY, SR PO BOX 682351 FRANKLIN TN 37068

SHARON COLEY 274 NOAH DR FRANKLIN TN 37064

In re **PPS PROPERTIES, LLC** 

Debtor(s)

Case No. Chapter

11

## CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **PPS PROPERTIES, LLC** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

■None [*Check if applicable*]

December 2, 2010

Date

/s/ Steven L. Lefkovitz Steven L. Lefkovitz 5953 Signature of Attorney or Litigant Counsel for PPS PROPERTIES, LLC LEFKOVITZ & LEFKOVITZ 618 CHURCH ST., #410 NASHVILLE, TN 37219 615-256-8300 Fax:615-255-4516 slefkovitz@lefkovitz.com