B1 (Official Form 1)(04/13)								
	States Bankr dle District of						Voluntary	Petition
Name of Debtor (if individual, enter Last, First, Simplex Healthcare, Inc.	Middle):		Name	of Joint De	ebtor (Spouse) (Last, First, 1	Middle):	
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):						oint Debtor in trade names):	the last 8 years	
Last four digits of Soc. Sec. or Individual-Taxpa (if more than one, state all) 20-8845325	yer I.D. (ITIN)/Comp	plete EIN	Last fo	our digits of than one, state	f Soc. Sec. or	· Individual-Ta	axpayer I.D. (ITIN) N	lo./Complete EIN
Street Address of Debtor (No. and Street, City, a c/o Resurgence Financial Services, LL 3514 Hobson Pike Hermitage, TN	_C	ZIP Code	Street	Address of	Joint Debtor	(No. and Stre	et, City, and State):	ZIP Code
County of Residence or of the Principal Place of Davidson		37076	Count	y of Reside	ence or of the	Principal Plac	ce of Business:	1
Mailing Address of Debtor (if different from stre P.O. Box 2255 Mount Juliet, TN Location of Principal Assets of Business Debtor (if different from street address above):	_	ZIP Code 37121	Mailin	g Address	of Joint Debt	or (if different	t from street address)	ZIP Code
Type of Debtor (Form of Organization) (Check one box) Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. Corporation (includes LLC and LLP) Partnership Other (If debtor is not one of the above entities, check this box and state type of entity below.)	(Check ☐ Health Care Bus ☐ Single Asset Re in 11 U.S.C. § 1 ☐ Railroad ☐ Stockbroker ☐ Commodity Bro	al Estate as d 01 (51B)	efined	Chapt Chapt Chapt Chapt Chapt Chapt	the I er 7 er 9 er 11 er 12	Petition is File Cha of a	cy Code Under Whited (Check one box) apter 15 Petition for It Foreign Main Proceute 15 Petition for It Foreign Nonmain Proceute 15 Petition for It Foreig	Recognition eding
Chapter 15 Debtors Country of debtor's center of main interests: Each country in which a foreign proceeding by, regarding, or against debtor is pending:		the United State	es	defined "incurr		(Check onsumer debts,	busin	s are primarily ness debts.
Filing Fee (Check one box) Full Filing Fee attached Filing Fee to be paid in installments (applicable to attach signed application for the court's consideration debtor is unable to pay fee except in installments. Form 3A. Filing Fee waiver requested (applicable to chapter attach signed application for the court's consideration described in the court's consideratio	individuals only). Must on certifying that the tule 1006(b). See Offici 7 individuals only). Mus	Check all St B.	btor is a sn btor is not btor's aggr less than 5 applicable blan is beir ceptances o	regate nonco \$2,490,925 (as boxes: ag filed with of the plan w	debtor as defir ness debtor as d ntingent liquida amount subject this petition.	ated debts (exclu to adjustment o		ee years thereafter).
Statistical/Administrative Information ** Debtor estimates that funds will be available Debtor estimates that, after any exempt prope there will be no funds available for distribution	erty is excluded and	secured cred administrative	itors.	es paid,		THIS S	SPACE IS FOR COURT	USE ONLY
1- 50- 100- 200- 1 49 99 199 999 5	1,000- 5,001- 5,000 10,000	10,001- 2	35,001- 60,000	50,001- 100,000	OVER 100,000			
\$50,000 \$100,000 \$500,000 to \$1 t million r	\$1,000,001 \$10,000,001 to \$50 million	\$50,000,001 \$ to \$100 to	100,000,001 o \$500 nillion	\$500,000,001 to \$1 billion	More than \$1 billion			
\$50,000 \$100,000 \$500,000 to \$1 to		\$50,000,001 \$	o \$500 nillion	\$500,000,001 to \$1 billion		/ 14-16:30):24 Dese l	√lain

B1 (Official For	rm 1)(04/13)			Page 2
Voluntar	y Petition		Name of Debtor(s): Simplex Healthcare	Inc
(This page mi	ıst be completed a	nd filed in every case)	Omplex Healthcale	, 1110.
(I G	1	rior Bankruptcy Cases Filed Within Las	t 8 Years (If more than tw	o, attach additional sheet)
Location Where Filed:		• •	Case Number:	Date Filed:
Location Where Filed:			Case Number:	Date Filed:
Pe	ending Bankrupto	cy Case Filed by any Spouse, Partner, or	Affiliate of this Debtor (If more than one, attach additional sheet)
Name of Debt - None -	tor:		Case Number:	Date Filed:
District:			Relationship:	Judge:
		Exhibit A		Exhibit B
forms 10K a pursuant to and is reque	and 10Q) with the Section 13 or 15(d sting relief under o	required to file periodic reports (e.g., Securities and Exchange Commission) of the Securities Exchange Act of 1934	I, the attorney for the peti have informed the petition 12, or 13 of title 11, Unite	
		Evh	l ibit C	
	•	ession of any property that poses or is alleged to d and made a part of this petition.		d identifiable harm to public health or safety?
☐ Exhibit If this is a jo	D completed and int petition:	ividual debtor. If a joint petition is filed, ea signed by the debtor is attached and made and signed by the joint debtor is attached a	a part of this petition.	
		Information Regardin	g the Debtor - Venue	
		(Check any ap	oplicable box)	
	days immediate	n domiciled or has had a residence, principely preceding the date of this petition or for	a longer part of such 180	days than in any other District.
	There is a bank	ruptcy case concerning debtor's affiliate, go	eneral partner, or partnersh	ip pending in this District.
	this District, or	tor in a foreign proceeding and has its prin- has no principal place of business or assets a federal or state court] in this District, or the District.	in the United States but i	s a defendant in an action or
		Certification by a Debtor Who Reside (Check all app		tial Property
	Landlord has a	judgment against the debtor for possession	of debtor's residence. (If b	ox checked, complete the following.)
		(Name of landlord that obtained judgment)		
		(Address of landlord)		
		hat under applicable nonbankruptcy law, th		er which the debtor would be permitted to cure
		tary default that gave rise to the judgment uded with this petition the deposit with the	-	
	Debtor certifies	that he/she has served the Landlord with the company of the Landlord with the company of the com	his certification. (11 U.S.C	5. § 362(I)). E/14 16:20:24 Dose Main

B1 (Official Form 1)(04/13) Page 3 Name of Debtor(s):

Voluntary Petition

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

Signatures

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

I declare under penalty of perjury that the information provided in this petition is true and correct.

If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Signature of Debtor

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

Date

Signature of Attorney*

\mathbf{X} <u>/s/ Paul G. Jennings</u>

Signature of Attorney for Debtor(s)

Paul G. Jennings 14367

Printed Name of Attorney for Debtor(s)

Bass, Berry & Sims PLC

Firm Name

150 Third Ave. S.

Suite 2800

Nashville, TN 37201

Address

615-742-6200 Fax: 615-742-6293

Telephone Number

May 15, 2014

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

/s/ Gary M. Murphey

Signature of Authorized Individual

Gary M. Murphey

Printed Name of Authorized Individual

President

Title of Authorized Individual

May 15, 2014

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

Simplex Healthcare, Inc.

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

United States Bankruptcy Court Middle District of Tennessee

In re	Simplex Healthcare, Inc.	Healthcare, Inc.		
		Debtor(s)	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 mailing address including zip code	Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted	Nature of claim (trade debt, bank loan, government contract, etc.)	Indicate if claim is contingent, unliquidated, disputed, or subject to setoff	Amount of claim [if secured, also state value of security]
See attached	See attached			2,446,616.09

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Best Case Bankruptcy

B4 (Official Form 4) (12/07) - Cont. In re Simplex Healthcare, Ir	ic.	Case No.			
	Debtor(s)				
LIST OF	CREDITORS HOLDING 20 LAI (Continuation SI		RED CLAIMS		
(1)	(2)	(3)	(4)	(5)	
Name of creditor and complete mailing address including zip code	Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted	Nature of claim (trade debt, bank loan, government contract, etc.)	Indicate if claim is contingent, unliquidated, disputed, or subject to setoff	Amount of claim [if secured, also state value of security]	
	DECLARATION UNDER PENDON BEHALF OF A CORPORATION				
	ent of the corporation named as the debtor in a list and that it is true and correct to the b			y that I	
Date May 15, 2014	\mathcal{E}	y M. Murphey I. Murphey			

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.

President

CONTINGENT/UNLIQUIDATED/ DISPUTED	AMOUNT OF CLAIM
	913,185.08
	478,462.95
	255,769.22
	190,715.85
	100,000.00
	76,080.61
	63,959.59
	60,000.00
	49,698.00
	45,310.00
	38,177.42
	32,718.73
	CONTINGENT/UNLIQUIDATED/ DISPUTED

CREDITOR'S NAME AND ADDRESS	CONTINGENT/UNLIQUIDATED/ DISPUTED	AMOUNT OF CLAIM
Robert Higgins 2008 Willowmet Ln Brentwood, TN 37027		28,474.19
Ellen Hitt 5021 Franklin Pike Nashville, TN 37220		25,384.65
Cornerstone on Demand 1601 Cloverfield Blvd #620 Santa Monica, CA 90404		22,800.00
MailFinance 478 Wheelers Farms Road Milford, CT 06461		17,738.67
Xpedite Systems PO Box 116451 Atlanta, GA 30368-6451		15,434.87
BDO USA 414 Union Street Suite 1800 Nashville, TN 37219		12,187.00
Williamson Co Trustee 1320 W Main St Ste 135 PO Box 724 Franklin, TN 37065		10,394.00
Corporate Cleaning Systems, LLC PO Box 40565 Nashville, TN 37204		10,125.26

United States Bankruptcy Court Middle District of Tennessee

In re	Simplex Healthcare, Inc.		Case No.	
-		Debtor		
			Chapter	11

SUMMARY OF SCHEDULES

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

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	0.00		
B - Personal Property	Yes	3	1,090,565.64		
C - Property Claimed as Exempt	No	0			
D - Creditors Holding Secured Claims	Yes	1		584,536.90	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	3		10,394.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	1		2,505,167.52	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	No	0			N/A
J - Current Expenditures of Individual Debtor(s)	No	0			N/A
Total Number of Sheets of ALL Schedu	ıles	11			
	To	otal Assets	1,090,565.64		
		1	Total Liabilities	3,100,098.42	

United States Bankruptcy Court Middle District of Tennessee

Simplex Healthcare, Inc.		Case No	
	Debtor		
		Chapter	11
STATISTICAL SUMMARY OF CERTAIN LI	ABILITIES AN	D RELATED DA	TA (28 U.S.C. § 15
f you are an individual debtor whose debts are primarily consumer d case under chapter 7, 11 or 13, you must report all information requ	ebts, as defined in § 1 lested below.	01(8) of the Bankruptcy	Code (11 U.S.C.§ 101(8))
☐ Check this box if you are an individual debtor whose debts are report any information here.	NOT primarily consu	imer debts. You are not r	equired to
This information is for statistical purposes only under 28 U.S.C.			
Summarize the following types of liabilities, as reported in the Sci	hedules, and total the	em.	
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 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, Form 22B Line 11; OR, Form 22C Line 20)			
State the following: 1. Total from Schedule D, "UNSECURED PORTION, IF ANY"			
2. Total from Schodule E. "AMOUNT ENTITY ED TO PRIORITY"			
Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column			
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column			
4. Total from Schedule F			

R6A	(Official	Form	6A)	(12/07)

In re	Simplex Healthcare, Inc.	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.

Current Value of Husband, Debtor's Interest in Wife, Nature of Debtor's Amount of Description and Location of Property Property, without Interest in Property Joint, or Secured Claim Deducting any Secured Claim or Exemption Community

None

Sub-Total > 0.00 (Total of this page) Total >

0.00

In re	Simplex Healthcare.	Inc

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 O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	X		
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	Comerica acct 1918	-	40,565.64
3.	Security deposits with public	Omnisys LLC	-	50,000.00
	utilities, telephone companies, landlords, and others.	Arriva Medical - Escrow Deposit (also listed on A-Z Diabetes Care Club Sch B)	-	1,000,000.00
4.	Household goods and furnishings, including audio, video, and computer equipment.	X		
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and 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. Name insurance company of each policy and itemize surrender or refund value of each.	X		
10.	Annuities. Itemize and name each issuer.	X		

Sub-Total > 1,090,565.64 (Total of this page)

2 continuation sheets attached to the Schedule of Personal Property

Simplex Healthcare, Inc. In re

Debtor

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

			(Continuation Sheet)		
	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	QDCC		-	Unknown
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated	Marketlink S	ettlement	-	Unknown
	claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	Positive ID S	Settlement	-	Unknown
				Sub-Tota	al > 0.00
			((Total of this page)	0.00

Sheet 1 of 2 continuation sheets attached to the Schedule of Personal Property

In re	Simplex	Healthcare,	Inc
III I C	OIITIPICA	ricallicarc,	1110

Case No.	

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

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

0.00 Sub-Total > (Total of this page) 1,090,565.64

Total >

Page 13 of 89

Document

•		
In re	Simplex Healthcare, Inc.	Case No.
	The state of the s	

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 "Unliquidated". (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 AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu: H W J C	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONT_ZGEZ	DZ L Q D L D A	S P U T E	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.			All assets of debtor	Т	D A T E D			
Lighthouse Capital Ptns VP LP 20 University Rd Suite 320 Cambridge, MA 02138	x	-	Value \$ 0.00	_	D		584,536.90	0.00
Account No.		Г	3.00	\vdash	Т	H	11.,000.00	3.30
			Value \$					
Account No.	T	Г		T	Т	Н		
			Value \$					
Account No.								
			Value \$	_				
continuation sheets attached			S (Total of th	Subt his 1		- 1	584,536.90	0.00
			(Report on Summary of Sc		ota lule		584,536.90	0.00

n re	Simplex Healthcare,	Inc.

Case No.	

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 <u>not</u> 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 \$12,475* 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 \$6,150* 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 \$2,775* 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 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

In re	Simplex Healthcare, Inc.	Case No.
	1	

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts Owed to Governmental Units

TYPE OF PRIORITY Husband, Wife, Joint, or Community AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, ODEBTOR ONTINGENT N L I QU I DATED S P U T E D AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED **AMOUNT** W INCLUDING ZIP CODE, AND CONSIDERATION FOR CLAIM OF CLAIM AMOUNT ENTITLED TO PRIORITY C AND ACCOUNT NUMBER (See instructions.) Account No. City of Franklin 0.00 PO Box 306097 Nashville, TN 37230 0.00 0.00 Account No. Florida Dept of Revenue 0.00 5050 W Tennessee St Tallahassee, FL 32399 0.00 0.00 Account No. Internal Revenue Service 0.00 PO Box 7346 Philadelphia, PA 19101-7346 0.00 0.00 Account No. Kentucky Dept of Revenue 0.00 Frankfort, KY 40620 0.00 0.00 Account No. Tennessee Dept of Revenue 0.00 TN Atty General's Office Bankr. Division PO Box 20207 Nashville, TN 37202-0207 0.00 0.00 Subtotal 0.00 Sheet 1 of 2 continuation sheets attached to

Schedule of Creditors Holding Unsecured Priority Claims

(Total of this page)

0.00

0.00

In re	Simplex Healthcare, Inc.	Case No.
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts Owed to Governmental Units

TYPE OF PRIORITY Husband, Wife, Joint, or Community AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, ODEBTOR ONTINGENT NLIQUIDATED S P U T E D AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED **AMOUNT** W INCLUDING ZIP CODE, AND CONSIDERATION FOR CLAIM OF CLAIM C AMOUNT ENTITLED TO PRIORITY AND ACCOUNT NUMBER (See instructions.) Account No. Williamson Co Trustee 0.00 1320 W Main St Ste 135 PO Box 624 Franklin, TN 37065 10,394.00 10,394.00 Account No. Account No. Account No. Account No. Subtotal 0.00 Sheet 2 of 2 continuation sheets attached to (Total of this page) 10,394.00 10,394.00 Schedule of Creditors Holding Unsecured Priority Claims Total 0.00

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(Report on Summary of Schedules)

10,394.00

10,394.00

In re	Simplex Healthcare, Inc.	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.

Check this box is debtor has no creditors nothing unsecure	-u c	1411	1111	is to report on this benedule 1.				
CREDITOR'S NAME,	C	Ηι	lus	sband, Wife, Joint, or Community	Ç	U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	C A H	۷	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	COXH — ZGEZH	021-00-04Fm0	I S P U T E D	AMOUNT OF CLAIM
Account No.	Г	Г	T		T	Ę		
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See attached		-						
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Account No.								
Account No.		Г	1		П	П	Г	
Account No.								
continuation sheets attached				S (Total of t	Subte his p			2,505,167.52
				(Report on Summary of Sc		ota lule		2,505,167.52

CREDITOR'S NAME AND ADDRESS AARON C BENNETT 1121 WAVERLY PLACE FRANKLIN TN 37067	CONTINGENT/UNLIQUIDATED/ DISPUTED NOTICE ONLY	AMOUNT OF CLAIM
ABILITY NETWORK INC 100 6TH ST NORTH SUITE 900A MINNEAPOLIS MN 55403 MINNEAPOLIS MN 55403		60,000.00
ACCOUNTTEMPS 21925 FIELD PARKWAY SUITE 100 DEER PARK IL 60010		3,782.40
ADP ONE ADP DR MS-100 AUGUSTA GA 30909		3,167.92
ADP SCREENING AND SELECTION SERVICES P.O. BOX 645177 CINCINNATI OH 45264-5177		0.00
ADVANCED NETWORK SOLUTIONS 820 PALMER PLACE NASHVILLE TN 37203		0.00
ALABAMA STATE BOARD OF PHARMACY P.O. BOX 381988 BIRMINGHAM AL 35238-2330		0.00
ALEXA E RITER 13306 CROWNE BROOK CIRCLE FRANKLIN TN 37067	NOTICE ONLY	-
ALL NEW REFURBISHING PO BOX 116719 ATLANTA GA 30368		0.00
ALLEN LYTTLE 5651 HICKORY PARK DR CANE RIDGE TN 37013	NOTICE ONLY	-
ALYSSIA A A SYPHERS 605 COBBLE COURT NASHVILLE TN 37211	NOTICE ONLY	-
AMANDA HOOD 2978 DUPLEX RD SPRING HILL TN 37174	NOTICE ONLY	-

CREDITOR'S NAME AND ADDRESS AMERICAN HEALTH DATA SERVICES INC 2220 COIT RD SUITE 480-139 PLANO TX 75075	CONTINGENT/UNLIQUIDATED/ DISPUTED	AMOUNT OF CLAIM 1,200.00
AMY KRANICK RD 3255 LOCUST HOLLOW NOLENSVILLE TN 37135 NOLENSVILLE TN 37135		400.00
ANDREA D CLAYBROOKS 901 VILLAGE HILLS DR NASHVILLE TN 37217	NOTICE ONLY	-
ANDREW HATTON 2605 SANDY DRIVE NASHVILLE TN 37216	NOTICE ONLY	-
ANGELIQUE D D MORENO 903 N 12TH ST. APT 15 NASHVILLE TN 37206	NOTICE ONLY	-
APERTURA INC PO BOX 1304 LAVERGNE TN 37086		3,217.50
ARMSTRONG TEASDALE 7700 FORSYTH BVD SUITE 1800 ST LOUIS MO 63105		220.00
AT&T 001 PO BOX 105503 ATLANTA GA 30348-5503	DISPUTED	-
AT&T 503 PO BOX 5019 CAROL STEAM IL 60197-5019	DISPUTED	-
AT&T 552 PO BOX 105068 ATLANTA GA 30348-5068	DISPUTED	-
AT&T 6153 PO BOX 5019 CAROL STREAM IL 60197	DISPUTED	-
AT&T 733032 VATIKA TRIANGLE 3RD FLOOR SUSHANT LOK-1 BLOCK A MG ROAD GURGAON-122022 HARYANA INDIA	DISPUTED	-

CREDITOR'S NAME AND ADDRESS AT&T MOBILITY PO BOX 6463	CONTINGENT/UNLIQUIDATED/ DISPUTED DISPUTED	AMOUNT OF CLAIM
CAROL STEAM IL 60197-6463		
AT&T PRO CABS PO BOX 105373 ATLANTA GA 30348 ATLANTA GA 30348	DISPUTED	-
AT&T VP04JZ PO BOX 5091 CAROL STREAM IL 60197	DISPUTED	-
BDO USA 414 UNION STREET SUITE 1800 NASHVILLE TN 37219		12,187.00
BENEFITS CONNECTION AP PO BOX 681569 FRANKLIN TN 37068-1569		411.40
BENJAMIN E. SASSE 1747 LAGUNA DR. FREMONT NE 68025		0.00
BLACKBOARD CONNECT INC. DEPT LA 23628 PASADENA CA 91185-3628		0.00
BLAKE WYLIE 202 GREEN VALLEY BLVD. FRANKLIN TN 37064	NOTICE ONLY	-
BLUE CROSS BLUE SHIELD TN RECEIPTS DEPARTMENT P.O. BOX 6539 CAROL STREAM IL 60197-6539		0.00
BRADLEY ARANT BOULT CUMMINGS LLP P.O. BOX 340025 NASHVILLE TN 37203-0025		0.00
BRIAN R LANG 309 APPLECROSS DRIVE FRANKLIN TN 37064	NOTICE ONLY	-
BRITTNEY FENTRESS 5112 ENGLISH VILLAGE DR NASHVILLE TN 37211	NOTICE ONLY	-

CREDITOR'S NAME AND ADDRESS BROOKSOURCE 3212 WEST END AV SUITE 200 NASHVILLE TN 37203	CONTINGENT/UNLIQUIDATED/ DISPUTED	AMOUNT OF CLAIM 49,698.00
BROWN & FORTUNATO, P.C. 905 S. FILLMORE SUITE 400 AMARILLO TX 79105		0.00
AMARILLO TX 79105 C3 CONSULTING LLC PO BOX 150871 NASHVILLE TN 37215		0.00
CALIFORNIA DEPARTMENT OF PUBLIC HEALTH FOOD AND DRUG BRANCH - CASHIER PO BOX 997435		0.00
MS 7602 CALIFORNIA STATE BOARD OF PHARMACY PO BOX 942533 STE M219 SACRAMENTO CA 94258		0.00
CANDACE BURTON 1184 CYNTHIA LANE SPRING HILL TN 37174	NOTICE ONLY	-
CAPITAL FILING SERVICES INC 992 DAVIDSON DR SUITE B NASHVILLE TN 37205		80.00
CARMEN M M WYNTER 1201 TIGERWOODS WAY MURFREESBORO TN 37129	NOTICE ONLY	-
CAROLYN STATEN 800 MULBERRY DRIVE COLUMBIA TN 38401	NOTICE ONLY	-
CHRISTIANSON BUSINESS PRODUCTS, INC. 2690 MEMORIAL BLVD SUITE E4 MURFREESBORO TN 37129		0.00
CHRISTOPHER M RIESGO 8114 MONTE BELLA PL FRANKLIN TN 37067	NOTICE ONLY	-
CHRISTOPHER R R YANCEY 1351 POLO FIELDS LANE COLUMBIA TN 38401	NOTICE ONLY	-

CREDITOR'S NAME AND ADDRESS CIGNA 300 BELLEVUE PARKWAY WILMINGTON DE 19708	CONTINGENT/UNLIQUIDATED/ DISPUTED	AMOUNT OF CLAIM 1,458.35
CISCO SYSTEMS CAPITAL CORPORATION P.O. BOX 742927 LOS ANGELES CA 90074-2927 LOS ANGELES CA 90074-2927		0.00
CITY OF FRANKLIN 109 3RD AVE S SUITE 141 FRANKLIN TN 37064		0.00
CITY OF LAKELAND CITY HALL 228 SOUTH MASSACHUSETTS AVE LAKELAND FL 33810		0.00
CLEARLINE NETWORKS 5925 CLARKSVILLE HWY JOELTON TN 37080		2,200.00
COLIN B BRADFORD GAST 1225 BEN HILL BLVD NOLENSVILLE TN 37135	NOTICE ONLY	-
COMCAST PO BOX 37601 PHILADELPHIA PA 19101-0601	DISPUTED	-
COMMERCE AND CONSUMER AFFAIRS HAWAII BAORD OF PHARMACY HONOLULU HI 96801		0.00
COMMONWEALTH OF VA BOARD OF PHARMACY 9960 MARYLAND DR, SUITE 300 HENRICO VA 23223		0.00
CONCUR 62157 COLLECTIONS CENTER DR CHICAGO IL 60693		1,128.45
CORNERSTONE ON DEMAND 1601 CLOVERFIELD BLVD #620 SANTA MONICA CA 90404		22,800.00 10,125.26
CORPORATE CLEANING SYSTEMS LLC PO BOX 40565 NASHVILLE TN 37204		10,125.20

CREDITOR'S NAME AND ADDRESS COUNSEL ON CALL, LLC 112 WESTWOOD PLACE SUITE 350 BRENTWOOD TN 37027	CONTINGENT/UNLIQUIDATED/ DISPUTED	AMOUNT OF CLAIM 0.00
CROWE HORWATH PO BOX 145415 CINCINNATI OH 45250-9791 CINCINNATI OH 45250-9791		3,960.00
CYNTHIA JOYCE GOMEZ 6007 ROMAIN CT SPRING HILL TN 37174	NOTICE ONLY	-
DAN B BRYAN STARNES 109 CAVALCADE DR FRANKLIN TN 37069	NOTICE ONLY	-
DARRYL B EMILY 3036 HOLDERWOOD DRIVE MURFREESBORO TN 37128	NOTICE ONLY	-
DATAMARKETING NETWORK 701 MURFREESBORO RD NASHVILLE TN 37210		0.00
DAVID HILL 1339 JEWELL AVENUE FRANKLIN TN 37064	NOTICE ONLY	-
DAVID STEVENS 5021 MARY ELLEN CIRCLE SMYRNA TN 37167		0.00
DC TREASURER ATTENTION: DC GOVERNMENT WHOLESALE LOCKBOX #91360 11333 MCCORMICK ROAD		0.00
BANK OF AMERICA LOCKBOX SERVICES DELL COMPUTERS PO BOX 534118 ATLANTA GA 30353-4118		0.00
DELTA DENTAL OF TENNESSEE PO BOX 305172 DEPT 35 NASHVILLE TN 37230-5172		0.00
DELUXE BUSINESS CHECKS AND SOLUTIONS PO BOX 742572 CINCINNATI OH 45274-2572		0.00

CREDITOR'S NAME AND ADDRESS DENNIS E PEEKE 2828 OLD HICKORY BLVD APT 612 NASHVILLE TN 37221	CONTINGENT/UNLIQUIDATED/ DISPUTED NOTICE ONLY	AMOUNT OF CLAIM
DEPARTMENT OF FINANCIAL & PROFESSIONAL REGULATION 320 W. WASHINGTON STREET, 3RD FLOOR SPRINGFIELD IL 62786 SPRINGFIELD IL 62786		0.00
DEPARTMENT OF HEALTH REVENUE SECTION P. O. BOX 1099 OLYMPIA WA 98504-1099		0.00
DEPT OF ASSES & TAX -STATE OF MD PERSONAL PROPERTY DIV 301 WEST PRESTON ST, ROOM 801 BALTIMORE MD 21201		0.00
DEX IMAGING 5225 HARDING PLACE NASHVILLE TN 37217		0.00
DHHS LICENSUE UNIT DIV / PUBLIC HEALTH PO BOX 94986 LINCOLN NE 68509		0.00
DIRECT TV PO BOX 60036 LOS ANGELES CA 90060-0036		274.33
DIVISION OF OCCUPATIONAL & PROFESSIONAL LICENSING 160 EAST 300 SOUTH, 1ST FLOOR LOBBY SALT LAKE CITY UT 84111		0.00
DUANE D D HUNTER 709 HERITAGE DRIVE MADISON TN 37115	NOTICE ONLY	-
EDDIE W LAWSON 14 SYCAMORE CT ANTIOCH TN 37013	NOTICE ONLY	-
ELIZABETH E DROKE 2608 MATCHSTICK PL SPRING HILL TN 37174	NOTICE ONLY	25,384.65
ELLEN HITT 5021 FRANKLIN PIKE NASHVILLE TN 37220		20,004.00

CREDITOR'S NAME AND ADDRESS ELLEN R HITT 5021 FRANKLIN PIKE NASHVILLE TN 37220	CONTINGENT/UNLIQUIDATED/ DISPUTED NOTICE ONLY	AMOUNT OF CLAIM
EMERSON 610 EXECUTIVE CAMPUS DR WESTERVILLE OH 43082 WESTERVILLE OH 43082		1,898.54
ERIC PARSONS 5845 NOLENSVILLE PIKE #119 NASHVILLE TN 37211	NOTICE ONLY	-
EXAMINATION MANAGEMENT SERVICES, INC PO BOX 202669 DALLAS TX 75320-2669		0.00
FED EX PO BOX 660481 DALLAS TX 75266-0481		182.17
FELIX F PENA 1205 AUTUMN WOOD CIRCLE COLUMBIA TN 38401	NOTICE ONLY	-
FIRE SPRINKLER LLC 149 PARK SOUTH COURT NASHVILLE TN 37210		288.44
FITNESS DIRECT SERVICE GROUP, INC. 2800 UNDERWOOD ROAD MOUNT JULIET TN 37122		0.00
FIVE STAR FOOD SERVICE 440 ALLIED DR NASHVILLE TN 37211		831.62
FLORIDA DEPARTMENT OF HEALTH BOARD OF PHARMACY P.O. BOX 6320 TALLAHASSEE FL 32314-6320		0.00
FLORIDA DEPT OF REVENUE 5050 WEST TENNESSEE STREET TALLAHASSEE FL 32399-0135		0.00
FLOW CONSTRUCTION COMPANY INC 3628 TROUSDALE DR SUITE E NASHVILLE TN 37204		4,896.00

CREDITOR'S NAME AND ADDRESS FOCUS HUMAN CAPITAL PO BOX 50917 NASHVILLE TN 37205	CONTINGENT/UNLIQUIDATED/ DISPUTED	AMOUNT OF CLAIM 0.00
FULL SERVICE INSURANCE INC. P.O. BOX 680639 FRANKLIN TN 37068-0639 FRANKLIN TN 37068-0639		0.00
G NEIL PO BOX 451179 SUNRISE FL 33345-1179		0.00
GALLAGHER BENEFIT SERVICES, INC. 2 PIERCE PLACE - 14TH FLOOR ITASCA IL 60143		0.00
GARNER GROUP LLC 188 FRONT STREET SUITE 116-58 FRANKLIN TN 37064		0.00
GENEVA, LLC P.O. BOX 934345 ATLANTA GA 31193-4345		0.00
GLOBAL DATAGUARD 3939 BELTLINE RD SUITE 400 DALLAS TX 75001		45,310.00
GOVERNMENT OF THE DISTRICT OF COLUMBIA DEPARTMENT OF HEALTH WASHINGTON DC 20002		0.00
GREAT AMERICAN FINANCIAL SVC 625 FIRST ST SE SUITE 800 CEDAR RAPIDS IA 52401-2031		76,080.61
HAL HASSALL 1336 ADAMS ST FRANKLIN TN 37064		0.00
HANBACK GROUP REGIONS INS 341 COOL SPRINGS BLVD 220 FRANKLIN TN 37067		839.72
HEALTHCARE DEVELOPMENT RESOURCES		0.00
1629 WHISPERING HILLS DR FRANKLIN TN 37069		

CREDITOR'S NAME AND ADDRESS	CONTINGENT/UNLIQUIDATED/ DISPUTED	AMOUNT OF CLAIM
HEALTHCARE FRAUD POLICY AND RESEARCH INSTITUTE, INC. CENTER FOR HEALTHCARE COMPLIANCE 9663 SANTA MONICA BLVD, NO. 648 BEVERLY HILLS CA 90210	DISPUTED	0.00
HEALTHCARE QUALITY ASSOCIATION ON ACCREDITATION PO BOX 1948 WATERLOO IA 50704-1948 WATERLOO IA 50704-1948		0.00
HEATHER N LOVIN 2649 JOE REEVES RD COLUMBIA TN 38401	NOTICE ONLY	·
HELPSTAR 2010 WINSTON PARK DRIVE STE 401 OAKVILLE ONTARIO L6H 5RH		0.00
HIGHWOODS REALTY LIMITED PARTNERSHIP 3322 WEST END AVE SUITE 600 NASHVILLE TN 37203		478,462.95
IBM GLOBAL PROCESS SERVICES ROUTE 100 SOMERS NY 10589		913,185.08
ICIMS.COM, INC. 90 MATAWAN ROAD PARKWAY 120, 5TH FLOOR MATAWAN NJ 7747		0.00
IDERA, INC 75 REMITTANCE DR, STE 6670 CHICAGO IL 60675-6670		0.00
IFRONT-END TECHNOLOGIES, INC. 5000 BIRCH ST. SUITE 3000 NEWPORT BEACH CA 92660		0.00
IMAGE QUEST PO BOX 293157 NASHVILLE TN 37229-3157		0.00
INNOVATIVE BUSINESS PRODUCTS 2625 GRANDVIEW AVE NASHVILLE TN 37211		7,582.64
INTERIOR DESIGN SERVICES PO BOX 116719 ATLANTA GA 30368-6719		7,582.64

CREDITOR'S NAME AND ADDRESS IOWA BOARD OF PHARMACY EXAMINERS 400 SW EIGHTH ST., SUITE E DES MOINES IA 50309	CONTINGENT/UNLIQUIDATED/ DISPUTED	AMOUNT OF CLAIM 0.00
IRON MOUNTAIN PO BOX 915026 DALLAS TX 75391-5026 DALLAS TX 75391-5026		2,249.14
ITEXT SOFTWARE CORP 2150 PORTOLA AVE SUITE D-239 LIVERMORE CA 94551		0.00
JAMES A ALAN PULFREY 1009 LICHFIELD COURT THOMPSONS STATION TN 37179	NOTICE ONLY	-
JAMES G GLEN BRAZIL 911 NECTAR COURT ADAMS TN 37010	NOTICE ONLY	-
JAMES HAGEWOOD 4487 POST PLACE #24 NASHVILLE TN 37205	NOTICE ONLY	-
JAMES M M HOLLAR 2800 ACKLEN AVE APT B NASHVILLE TN 37212	NOTICE ONLY	-
JAMIE D D GOSSEN 313 SIERRA DRIVE MURFREESBORO TN 37129	NOTICE ONLY	-
JASON E TRENT 257 NOAH DRIVE NASHVILLE TN 37064	NOTICE ONLY	-
JEANNIE V REYNOLDS 281 LE BEAU LANE ST. CHARLES MO 63303	NOTICE ONLY	-
JENNIFER C PETERS 2210 SHARONDALE DRIVE NASHVILLE TN 37215	NOTICE ONLY	-
JENNIFER I I BRESSON 717 ANSLEY COURT ANTIOCH TN 37013	NOTICE ONLY	-

CREDITOR'S NAME AND ADDRESS JENNIFER L O'LEARY 8320 ELMCROFT COURT NOLENSVILLE TN 37135	CONTINGENT/UNLIQUIDATED/ DISPUTED NOTICE ONLY	AMOUNT OF CLAIM
JENNIFER R R WOOD 421 LIBERTY PIKE # 305 FRANKLIN TN 37064 FRANKLIN TN 37064	NOTICE ONLY	-
JENNIFER S PATRICK 3261 NOLEN LANE FRANKLIN TN 37064	NOTICE ONLY	-
JENNIFER S S LYLE 2960 HEARTHSIDE DR SPRING HILL TN 37174	NOTICE ONLY	-
JEREMY LANDA 1382 MOONLIGHT TRAIL BRENTWOOD TN 37027	NOTICE ONLY	-
JIM CASE 5337 CLOISTER DRIVE MURFREESBORO TN 37128		0.00
JOANN DELMAR 234 WESTFIELD DRIVE NASHVILLE TN 37221	NOTICE ONLY	-
JOE G. TEDDER, TAX COLLECTOR P.O. BOX 2016 BARLOW FL 33831-2016		0.00
KAREN S MUSACCHIO 8041 POPLARWOOD ROAD NASHVILLE TN 37221	NOTICE ONLY	-
KATHY SELLERS 205 KEY COURT BRENTWOOD TN 37027		0.00
KBK CONSULTING LLC 3500 NW BOCA RATON BLVD STE 704 BOCA RATON FL 33431		1,781.25
KEITH WILLIAM SORRELS 5025 HILLSBORO PIKE APT 24N NASHVILLE TN 37215	NOTICE ONLY	-

CREDITOR'S NAME AND ADDRESS KELLI B BEACHUM 2033 SILVERTON CIRCLE SPRING HILL TN 37174	CONTINGENT/UNLIQUIDATED/ DISPUTED NOTICE ONLY	AMOUNT OF CLAIM
KENNETH NEIL SULLIVAN 504 HAYNES STREET NASHVILLE TN 37207 NASHVILLE TN 37207	NOTICE ONLY	-
KENTUCKY BOARD OF PHARMACY STATE OFFICE BUILDING ANNEX 125 HOLMES STREET SUITE 300 FRANKFORT KY 40601		0.00
KENTUCKY STATE TREASURER KENTUCKY BOARD OF PHARMACY 125 HOLMES ST. STATE OFFICE BUILDING AMEX, SUITE 300 FRANKFORT KY 40601		0.00
KERLETHA J DAUGHERTY 716 ROBERT CARTWRIGHT DR GOODLETTSVILLE TN 37072	NOTICE ONLY	-
KIMBERLY PROVENZANO 1125 MAGNOLIA DRIVE APT D55 FRANKLIN TN 37064	NOTICE ONLY	-
KRISTY L MCKENNON 1049 COUNTESS LANE SPRING HILL TN 37174	NOTICE ONLY	-
LANDA JEREMY 1382 MOONLIGHT TRAIL BRENTWOOD TN 37027		100,000.00
LARSON DOUG HUDSON 2304 VALLEY BROOK RD NASHVILLE TN 37215	NOTICE ONLY	255,769.22
LARSON HUDSON 2304 VALLEY BROOK ROAD NASHVILLE TN 37215	NOTICE CHEI	0.00
LAST SECOND MEDIA 220 TURTLE CREEK DR ARLINGTON TX 76010	NOTICE ONLY	-
LAURA M MURI 2806 WASHINGTON COURT THOMPSON STATION TN 37179		

CREDITOR'S NAME AND ADDRESS LEE MARY WINREB 3920 JOHNSON HOLLOW ROAD THOMPSONS STATION TN 37179	CONTINGENT/UNLIQUIDATED/ DISPUTED NOTICE ONLY	AMOUNT OF CLAIM
LEVEL (3) PO BOX 910182 DENVER CO 80291-0182 DENVER CO 80291-0182	DISPUTED	-
LIFE INSURANCE COMPANY OF NORTH AMERICA PO BOX 8500 - 110 PHILADELPHIA PA 19178-0110		0.00
LORI DEFFES CAMBAS 7125 HUNTERS BRANCH DR. NE ATLANTA GA 30328		0.00
LOUIE WAYNE WOOTEN 9637 S. 102ND E AVE TULSA OK 74133		0.00
LOYALTYWORKS 2337 PERIMETER PARK DR SUITE 220 ATLANTA GA 30341		15.00
MAILFINANCE 478 WHEELERS FARMS ROAD MILFORD CT 06461		17,738.67
MAINE STATE TREASURER BOARD OF PHARMACY AUGUSTA ME 04333-0035		0.00
MARIANNE U U LAMKIN 2245 SEVEN POINTS CIRCLE HERMITAGE TN 37076	NOTICE ONLY	-
MARKETING DIRECT LLC, A MEMBER OF THE KBM GROUP 530 MARYVILLE CENTRE DRIVE SUITE 300 ST LOUIS MO 63141		0.00
MARSHALL WOKSA 1403 EASTLAND AVE NASHVILLE TN 37206		0.00
MARY N WHITE 531 CEDAR PARK CIRCLE LAVERGNE TN 37086	NOTICE ONLY	-

CREDITOR'S NAME AND ADDRESS MATTHEW D HICKS 4755 BILLINGSGATE RD ANTIOCH TN 37013	CONTINGENT/UNLIQUIDATED/ DISPUTED NOTICE ONLY	AMOUNT OF CLAIM
MATTHEW G G TAPIA 1420 CALVIN AVENUE NASHVILLE TN 37206 NASHVILLE TN 37206	NOTICE ONLY	-
MATTHEW HICKS 2636 GRAND BLVD. LAKE STATION IN 46405		0.00
MATTHEW S KUHN 311 MONTICELLO ROAD FRANKLIN TN 37064	NOTICE ONLY	-
MELISSA A SMITH-MOORE 7821 HEATON WAY NASHVILLE TN 37211	NOTICE ONLY	-
MELISSA DATA CORPORATION 22382 AVENIDA EMPRESA RANCHO SANTA MARGARITA CA 92688-2112		0.00
MELISSA S KILLEBREW 1230 BROADGATE DRIVE FRANKLIN TN 37067	NOTICE ONLY	-
MERRY ELIZABETH WARD 2731 SHARONDALE COURT NASHVILLE TN 37215		0.00
MERRYMAN-FARR, LLC. 305 HILL AVENUE NASHVILLE TN 37210		0.00
MICHAEL S ISKRA 1316 STATE BLVD FRANKLIN TN 37064	NOTICE ONLY	-
MICHAEL W W ALEXANDER P.O. BOX 330127 MURFREESBORO TN 37133	NOTICE ONLY	-
MICROSOFT FINANCING 995 DALTON AVE CINCINNATI OH 45203		190,715.85

CREDITOR'S NAME AND ADDRESS MICROSOFT SERVICES PO BOX 844510 BOA, DALLAS DALLAS TX 75284-4510	CONTINGENT/UNLIQUIDATED/ DISPUTED	AMOUNT OF CLAIM 0.00
MINNESOTA BOARD OF PHARMACY 2829 UNIVERSITY AVE SE #530 MINNEAPOLIS NM 55414 MINNEAPOLIS NM 55414		0.00
MISSISSIPPI STATE BOARD OF PHARMACY 204 KEY DRIVE SUITE D MADISON MS 39110		0.00
MISSOURI BOARD OF PHARMACY P. O. BOX 625 JEFFERSON CITY MO 65102		0.00
MITCHELL S BAKER 1240 DALMALLY DRIVE MURFREESBORO TN 37128	NOTICE ONLY	-
MONTANA BOARD OF PHARMACY P.O. BOX 200513 HELENA MT 59620-0513		0.00
NAOMI L LEA ROWE 1403 MCMEEN CIRCLE COLUMBIA TN 38401	NOTICE ONLY	-
NARCOTICS ENFORCEMENT DIVISION 3375 KOAPAKA ST, SUITE D100 HONOLULU HI 96819		0.00
NAVEX GLOBAL, INC PO BOX 60941 CHARLOTTE NC 60941		0.00
NCONTRACTS 214 OVERLOOK CIRCLE SUITE 152 BRENTWOOD TN 37027		3,125.00
NEA DEVELOPMENT CORPORATION 1954 GREENSPRING DRIVE SUITE 600 TIMONIUM MD 21093-4135		0.00
NEOFUNDS BY NEOPOST P.O. BOX 30193 TAMPA FL 33630-3193		0.00

CREDITOR'S NAME AND ADDRESS	CONTINGENT/UNLIQUIDATED/ DISPUTED	AMOUNT OF CLAIM
NEW JERSEY STATE BOARD OF PHARMACY DIVISION OF CONSUMER AFFAIRS 124 HALSEY ST., 6TH FLOOR, PO BOX 45013 BOARD OF PHARMACY NEWARK NV 97101	DISPUTED	0.00
NEW MEXICO BOARD OF PHARMACY 5200 OAKLAND NE SUITE A ALBUQUERQUE NM 87113 ALBUQUERQUE NM 87113		0.00
NEXT JUMP INC 261 FIFTH AVE 8TH FLOOR NEW YORK NY 10016		642.90
NIXON POWER 5038 THOROUGHBRED LANE BRENTWOOD TN 37027		284.05
N'JEVITY 9250 E COSTILLA AVENUE SUITE 325 GREENWOOD VILLAGE CO 80112		0.00
OHIO TREASURER OF STATE OHIO DEPARTMENT OF TAXATION COLUMBUS OHIO 43218-2101		0.00
OKLAHOMA STATE BOARD OF PHARMACY 4545 LINCOLN BLVD, STE 112 OKLAHOMA CITY OK 73105-3413		0.00
OMNISYS LLC 15950 DALLAS PKWY STE 350 DALLAS TX 75248	CONTINGENT	-
OREGON BOARD OF PHARMACY 800 NE OREGON ST., SUITE 150 PORTLAND OR 97232		0.00
PARANET CORPORATION SERVICES INC 3675 CRESTWOOD PKWY SUTE 350 DULUTH GA 30096		4,420.28
PARKER POE ADAMS & BERNSTEIN LLP THREE WELLS FARGO CENTER, STE 3000 401 S, TRYON STREET CHARLOTTE NC 38202-1942		0.00
PATIENCE R R PRESNELL 5112 ENGLISH VILLAGE DR NASHVILLE TN 37211	NOTICE ONLY	-

CREDITOR'S NAME AND ADDRESS PATRICIA H SMITH 2125 KENOWICK COURT	CONTINGENT/UNLIQUIDATED/ DISPUTED NOTICE ONLY	AMOUNT OF CLAIM
SPRING HILL TN 37174		
PERSHING YOAKLEY & ASSOC 2220 SUTHERLAND AVE KNOXVILLE TN 37919 KNOXVILLE TN 37919		0.00
PETER J BAUER 3043 SAKARI CIRCLE SPRING HILL TN 37174	NOTICE ONLY	-
PRESIDO 5337 MILLENIA LAKES BLVD STE 300 ORLANDO FL 32839-6302		780.38
PRINCIPAL LIFE INSURANCE COMPANY PRINCIPAL FINANCIAL GROUP PO BOX 14481 DES MOINES IA 50306-3481		0.00
PRISCILLA'S PLANTS, INC. PO BOX 120132 NASHVILLE TN 37212		0.00
PROGRAMMING RESOURCES INC 4711TROUSDALE DR SUITE 124 NASHVILLE TN 37220		38,177.42
QUICKMED COLLECT P O BOX 331703 NASHVILLE TN 37203-7516		0.00
RACHELE D ALMANT-POWERS 401 BRICK PATH LANE APT 106 FRANKLIN TN 37064	NOTICE ONLY	-
RANDSTAD 341 COOL SPRINGS BLVD SUITE 205 FRANKLIN TN 37067		2,060.80
RAYMOND W W CUNNINGHAM 555 CHURCH ST APT 1801 NASHVILLE TN 37219	NOTICE ONLY	-
REGENCY OFFICE PRODUCTS LLC 209 10TH AVE S SUITE 427 NASHVILLE TN 37203		103.51

CREDITOR'S NAME AND ADDRESS	CONTINGENT/UNLIQUIDATED/ DISPUTED	AMOUNT OF CLAIM
RI GENERAL TREASURER RHODE ISLAND BOARD OF PHARMACY 3 CAPITOL HILL ROOM 205 PROVIDENCE RI 2908	DISPUTED	0.00
RICHARD L MONTGOMERY 821 COLD CREEK TRAIL NASHVILLE TN 37211 NASHVILLE TN 37211	NOTICE ONLY	-
RICHARD L MONTGOMERY 821 COLD CREEK TRAIL NASHVILLE TN 37211		0.00
RICHARDS & RICHARDS INC TERM FEE 1741 ELM HILL PIKE NASHVILLE TN 37210		900.00
ROBERT A A SWIATEK 207 BOBBY DRIVE FRANKLIN TN 37069	NOTICE ONLY	-
ROBERT HIGGINS 2008 WILLOWMET LN BRENTWOOD TN 37027		28,474.19
ROBERT HIGGINS 2008 WILLOWMET LN BRENTWOOD TN 37027	NOTICE ONLY	-
RYAN D WHITCOMB 508 GAMMON LANE LAVERGNE TN 37086	NOTICE ONLY	-
RYAN WETTERGREN 9149 CARISSA DR BRENTWOOD TN 37027	NOTICE ONLY	-
SAFFORD MOTLEY PLC 1204 17TH AVENUE SOUTH NASHVILLE TN 37212		0.00
SANDRA HODGE P.O. BOX 280287 NASHVILLE TN 37228	NOTICE ONLY	-
SAYER40, INC. P.O. BOX 66230 CHICAGO IL 60666-0230		0.00

CREDITOR'S NAME AND ADDRESS	CONTINGENT/UNLIQUIDATED/ DISPUTED	AMOUNT OF CLAIM
SCARLETT LEADERSHIP INST 840 CRESCENT CENTRE DRIVE STE 120 FRANKLIN TN 37067		0.00
SCOTT K JOHNSON 3729 HUBBARD AVE N ROBBINSDALE MN 55422 ROBBINSDALE MN 55422		0.00
SCOTT SKIBBIE, INC 532 MONTRIDGE COURT FRANKLIN TN 37067		0.00
SCOTT'S DIABETES 3729 HUBBARD AVE N ROBBINSDALE MN 55422		250.00
SEIGENTHALER PUBLIC RELATIONS 115 29TH AVE S NASHVILLE TN 37212		32,718.73
SHAREHOLDER INSITE INC 521 8TH AVE S SUITE 307 NASHVILLE TN 37203		175.00
SHOTS ETC 7648 HIGHWAY 70 S SUITE 15 NASHVILLE TN 37221		220.00
SIGN STATION 526 B DONELSON PIKE NASHVILLE TN 37214		0.00
SO DAKOTA BOARD OF PHARMACY 3701 W 49TH STREET, SUITE 204 SIOUX FALLS SD 57106		0.00
SOFTENSITY 3535 ROSWELL RD SUITE 45 MARIETTA GA 30062		6,336.00
SOLARWINDS 3711 S. MOPAC EXPRESSWAY BLDG TWO AUSTIN TX 78746		0.00
SOUTH CAROLINA BOARD OF PHARMACY P.O. BOX 11927 COLUMBIA SC 29211-1927		0.00

CREDITOR'S NAME AND ADDRESS SOUTHEAST EMBROIDERY WORKS 5524 HILLVIEW DRIVE BRENTWOOD TN 37027	CONTINGENT/UNLIQUIDATED/ DISPUTED	AMOUNT OF CLAIM 0.00
SPANN INSURANCE, INC P.O. BOX 40386 NASHVILLE TN 37204-0386 NASHVILLE TN 37204-0386		0.00
SPEECH-SOFTSOLUTIONS LLC 25 NW 144TH SUITE C EDMOND OK 73012		0.00
ST OF TN DEPT HEALTHC BOARD OF PHARM 227 FRENCH LANDING, SUITE 300 NASHVILLE TN 37243		0.00
STATE OF ALASKA BOARD OF PHARMACY 333 WILLOUGHBY AVENUE, 9TH FLOOR STATE OFFICE BUILDING JUNEAU AK 99811		0.00
STATE OF COLORADO DIV OF REGISTRATIONS DENVER CO 80202		0.00
STATE OF MICHIGAN MICHIGAN DEPARTMENT OF COMMUNITY HEALTH P.O. BOX 30670 BOARD OF PHARMACY		0.00
STATE OF MISSOURI ATTORNEY GENERAL 207 W. HIGH ST. JEFFERSON CITY MO 65102		0.00
STEPHANIE MATLOCK 2156 SUNSET DRIVE WHITE BLUFF TN 37187	NOTICE ONLY	-
STEPHEN D D BRATCHER 3504 MT VIEW RIDGE DR ANTIOCH TN 37013	NOTICE ONLY	-
STORIE A ANN YOUNG 1000 ELMORE RD. EAGLEVILLE TN 37060	NOTICE ONLY	-
TAMMY FUQUA 175 CLARENTON CIRCLE FRANKLIN TN 37069	NOTICE ONLY	-

CREDITOR'S NAME AND ADDRESS	CONTINGENT/UNLIQUIDATED/ DISPUTED	AMOUNT OF CLAIM
TENNESSEE BOARD OF PHARMACY TENNESSEE DEPARTMENT OF HEALTH 227 FRENCH LANDING, SUITE 300 HEALTH RELATED BOARDS NASHVILLE TN 37243		0.00
TENNESSEE DEPARTMENT OF HEALTH 227 FRENCH LANDING, SUITE 300 NASHVILLE TN 37243 NASHVILLE TN 37243		0.00
TENNESSEE DEPARTMENT OF REVENUE ANDREW JACKSON STATE OFFICE BUILDING 500 DEADERICK STREET NASHVILLE TN 37242		0.00
TERESA REEVES 107 GALE LANE LAVERGNE TN 37086	NOTICE ONLY	-
TERRY R BLANKENSHIP 5528 HILLVIEW DRIVE BRENTWOOD TN 37027	NOTICE ONLY	-
TERRY READ BLANKENSHIP 5528 HILLVIEW DRIVE BRENTWOOD TN 37027	NOTICE ONLY	-
TEXAS STATE BOARD OF PHARMACY 333 GUADALUPE ST., SUITE 3-600 AUSTIN TX 78701		0.00
THE HARTFORD PO BOX 660916 DALLAS TX 75266-0916		0.00
THE PRINT SHOP 2812 LEBANON RD. DONELSON TN 37214		0.00
THE TENNESSEAN P.O. BOX 677589 DALLAS TX 75267-7589		0.00
THE VACCINATION CLINIC, PC 7648 HWY 70 S. SUITE 15 NASHVILLE TN 37221		0.00
THOMAS R WALTERS 3828 WILLIAMETTE DR. NASHVILLE TN 37221	NOTICE ONLY	-

CREDITOR'S NAME AND ADDRESS TIFFANY J J MILLER-KENNEDY 2864 CREEKBEND DRIVE NASHVILLE TN 37207	CONTINGENT/UNLIQUIDATED/ DISPUTED NOTICE ONLY	AMOUNT OF CLAIM
TINA L NEVETTE 202 AVRA COURT COLUMBIA TN 38401 COLUMBIA TN 38401	NOTICE ONLY	-
TINA PERCY 9956 LODESTONE DR BRENTWOOD TN 37027	NOTICE ONLY	-1
TOM GLYNN P.O. BOX 55071 #8903 BOSTON MA 02205-5071		0.00
TONYA SANDERS PO BOX 2103 ANTIOCH TN 37011	NOTICE ONLY	-
TRAVELERS PO BOX 660317 DALLAS TX 75266-0317		0.00
TREASURER, STATE OF OHIO OHIO RESPIRATORY CARE BOARD HME DIV 77 SOUTH HIGHT STREET, 16TH FLOOR COLUMBUS OH 43215		0.00
TSCPA 201 POWELL PLACE BRENTWOOD TN 37027		0.00
TUMEKO J APONTE 2177 CHRISTINA COURT HERMITAGE TN 37076	NOTICE ONLY	-
UNIVERSAL SOFTWARE SOLUTIONS 1334 S IRISH ROAD DAVIDSON MI 48423		0.00
UNUM 2211 CONGRESS STREET PORTLAND ME 04122-0001		0.00
VALUE LABS INC 3235 SATELLITE BLVD BLDG 400 STE 300 DULUTH GA 30096		63,959.59

CREDITOR'S NAME AND ADDRESS	CONTINGENT/UNLIQUIDATED/	AMOUNT OF CLAIM
VERMONT SECRETARY OF STATE VERMONT BOARD OF PHARMACY NATIONAL LIFE BUILDING, NORTH, FL 2 MONTPELIER VT 5620	DISPUTED	0.00
VERSUS HEALTHCARE LLC KAY GRIFFIN ENKEMA & COLBERT PLLC 222 SECOND AVE N STE 340 M NASHVILLE TN 37201 NASHVILLE TN 37201	DISPUTED	-
VINCENT C GOMEZ 470 HILLVIEW DRIVE MURFREESBORO TN 37127	NOTICE ONLY	-
VISION SERVICE PLAN P.O. BOX 742788 LOS ANGELES CA 90074-2788		0.00
WEST VIRGINIA BOARD OF PHARMACY 232 CAPITOL STREET CHARLESTON WV 25301		0.00
WILLIAMSON COUNTY TRUSTEE PO BOX 1365 FRANKLIN TN 37065-1365		0.00
WILLIAMSON COUNTY-FRANKLIN CHAMBER OF COMMERCE 5005 MERIDIAN BLVD SUITE 150		0.00
FRANKLIN, TN 37067 WINDSTREAM COMMUNICATIONS PO BOX 9001950 LOUISVILLE KY 40290-1950	DISPUTED	-
WINDSTREAM PAETEC PAETEC PO BOX 9001013 LOUISVILLE KY 40290-1013	DISPUTED	-
WISCONSIN DEPARTMENT OF REGULATION AND LICENSING 1400 E. WASHINGTON AVE MADISON WI 53703		0.00
WYOMING STATE BOARD OF PHARMACY 1712 CAREY AVENUE STE 200 CHEYENNE WY 82002		0.00
XPEDITE SYSTEMS PO BOX 116451 ATLANTA GA 30368-6451		15,434.87

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Cincular		1
Simplex	Healthcare,	inc.

Case No			
	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.
Franklin Collection Services Inc PO Box 3910 Tupelo, MS 38803	Collection of accounts receivable
HRLP Riverwood, LLC c/o Highwoods Properties Inc 3322 West End Ave Suite 600 Nashville, TN 37203	Original office lease entered into 7/2009 Agreement to surrendering possession limiting maximum obligation to \$706,762.95
Omnisys LLC PO Box 8785 Greenville, TX 75404-8785	Coordinate Pre and Post payment Audit/Denial coordination from initial audit through Administrative Law Judge Hearing with office of Medicare Hearings and Appeals
Patient Focus 814 Church Street Suite 300 Nashville, TN 37203	Collection of accounts receivable
Richards & Richards Office Records Mgmt PO Box 17070	Records storage

Nashville, TN 37217

In re	Simplex Healthcare, Inc.	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	NAME AND ADDRESS OF CREDITOR
A-Z Diabetes Care Club LLC PO Box 2255 Mount Juliet, TN 37121	Lighthouse Capital Ptns VP LP 20 University Rd Suite 320 Cambridge, MA 02138

United States Bankruptcy CourtMiddle District of Tennessee

In re	Simplex Healthcare, Inc.			Case No.	
			Debtor(s)	Chapter	
	DECLARATION CONCI	ERN	ING DEBTOR'S SO	CHEDUL	ES
	DECLARATION UNDER PENALTY OF PERJU	URY (ON BEHALF OF CORPO	ORATION (OR PARTNERSHIP
	I, the President of the corporation named as	c dobi	tor in this case, declare ur	dor populty	of pariury that I have
	read the foregoing summary and schedules, consisti				
	best of my knowledge, information, and belief.	Ü		·	
ъ.	May 45, 2044		/a/ Cam / NA Marmahar		
Date	May 15, 2014 Signat	ture	/s/ Gary M. Murphey Gary M. Murphey		
			President		
Per	nalty for making a false statement or concealing prope	erty: 1	Fine of up to \$500,000 or	imprisonme	ent for up to 5 years or both.

18 U.S.C. §§ 152 and 3571.

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United States Bankruptcy Court Middle District of Tennessee

In re	Simplex Healthcare, Inc.		Case No.	
		Debtor(s)	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 persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

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 \$584,055.00 2013 \$0.00 2012

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

filed.)

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 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 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
DATES OF
PAYMENTS
AMOUNT PAID
OWING

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 \$6,225*. 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

AMOUNT DATES OF PAID OR PAYMENTS/ AMOUNT STILL VALUE OF NAME AND ADDRESS OF CREDITOR **TRANSFERS OWING** TRANSFERS **ADP** 03/13/2014 \$1.382.40 \$0.00 Arriva Medical 02/19/2014 \$80,000.00 \$0.00 Arriva Medical 03/28/2014 \$16,036.09 \$0.00 Arriva Medical 05/04/2014 \$16,920.93 \$0.00 \$5,000.00 Bass, Berry & Sims 02/13/2014 \$0.00 Bass, Berry & Sims 03/24/2014 \$15,000.00 \$0.00 Bass, Berry & Sims 05/02/2014 \$35,000.00 \$0.00 Comerica 02/13/2014 \$3,164.56 \$0.00 Comerica 02/13/2014 \$3.20 \$0.00 Comerica 03/04/2014 \$0.30 \$0.00 Comerica 03/13/2014 \$1,578.75 \$0.00 Comerica 04/02/2014 \$111.55 \$0.00 Comerica 04/02/2014 \$25.15 \$0.00

04/09/2014

Comerica

\$0.00

\$0.42

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

NAME AND ADDRESS OF CREDITOR Comerica	DATES OF PAYMENTS/ TRANSFERS 04/11/2014	AMOUNT PAID OR VALUE OF TRANSFERS \$2,013.89	AMOUNT STILL OWING \$0.00
Comerica	04/15/2014	\$243.85	\$0.00
Department of Treasury	02/25/2014	\$35,526.85	\$0.00
Department of Treasury	02/25/2014	\$84.00	\$0.00
Lighthouse Partners	03/19/2014	\$677,000.00	\$0.00
Lighthouse Partners	03/20/2014	\$85,000.00	\$0.00
Nicholson, Nicole	03/24/2014	\$1,740.00	\$0.00
Resurgence Rinancial Services, LLC	02/19/2014	\$34,764.92	\$0.00
Resurgence Financial Services, LLC	03/11/2014	\$14,253.04	\$0.00
Resurgence Financial Services, LLC	03/20/2014	\$11,760.00	\$0.00
Resurgence Financial Services, LLC	04/14/2014	\$12,144.80	\$0.00
Resurgence Financial Services, LLC	05/02/2014	\$25,165.00	\$0.00
Resurgence Financial Services, LLC	05/08/2014	\$15,435.00	\$0.00
Richards & Richards Inc	04/23/2014	\$3,985.80	\$0.00

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 RELATIONSHIP TO DEBTOR DATE OF PAYMENT AMOUNT PAID OWING

See #23 below \$0.00

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 AND CASE NUMBER Verus Healthcare LLC r/k/a CPAC Care Club LLC vs. Simplex Healthcare Inc; Case No. 42845 NATURE OF PROCEEDING lawsuit COURT OR AGENCY AND LOCATION

STATUS OR DISPOSITION

Chancery Court for Williamson County,

Tennessee

one

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

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.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment 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 ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official 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 CUSTODIAN NAME AND LOCATION
OF COURT
CASE TITLE & NUMBER

DATE OF

DESCRIPTION AND VALUE OF

CASE TITLE & NUMBER ORDER PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions 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 PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses 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.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

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.

NAME AND ADDRESS OF PAYEE

Resurgence Financial Services, LLC 3330 Cumberland Blvd, Suite 500 Atlanta, GA 30339

Bass, Berry & Sims PLC 150 Third Ave South, Suite 2800 Nashville, TN 37201

DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

173,041.76

32,811.50

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include 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 TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for 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 INSTITUTION

Comerica Bank

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

Checking (payroll) 1876

AMOUNT AND DATE OF SALE OR CLOSING

3/2014

Comerica Bank checking (cash collateral) 1983 1/2014

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories 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 BANK OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS DATE OF TRANSFER OR SURRENDER, IF ANY

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13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this 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.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None

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

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

None

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS 6840 Carothers Parkway Franklin, TN 37067

NAME USED

DATES OF OCCUPANCY 7/31/2009 to 1/17/2014

16. Spouses and Former Spouses

None

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 eight years 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.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

SITE NAME AND ADDRESS

NAME AND ADDRESS OF

DATE OF

ENVIRONMENTAL

GOVERNMENTAL UNIT

NOTICE

LAW

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF

DATE OF

ENVIRONMENTAL

SITE NAME AND ADDRESS

GOVERNMENTAL UNIT

NOTICE

LAW

Best Case Bankruptcy

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business

None П

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 SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO.

(ITIN)/ COMPLETE EIN ADDRESS NAME 73-1628560

NATURE OF BUSINESS

BEGINNING AND

ENDING DATES

A-Z Diabetes Care Club LLC

a/k/a Diabetes Care Club 6840 Carothers Parkway Franklin, TN 37067

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 Jeremy Landa 1832 Moonlight Trail Brentwood, TN 37027

1/1/12 to 12/31/13

1/1/12 to 12/31/13

DATES SERVICES RENDERED

Tammy Fugua 175 Clarendon Circle Franklin, TN 37069

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NAME AND ADDRESS Karen Musacchio 8041 Poplarwood Rd Nashville, TN 37221

DATES SERVICES RENDERED 1/1/12 to 12/31/13

Resurgence Financial Services 3330 Cumberland Blvd, Suite 500 1/1/14 to current

Atlanta, GA 30339

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.

NAME **ADDRESS** DATES SERVICES RENDERED

BDO USA, LLP 414 Union St Suite 1800

Nashville, TN 37219

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 Resurgence Financial Services LLC **ADDRESS**

3330 Cumberland Blvd, Suite 500

2012

Atlanta, GA 30339

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.

NAME AND ADDRESS Comerica Bank

DATE ISSUED

Lighthouse Partners VI LP

20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

None b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, None controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

Gary Murphey President/Board of Director

NAME AND ADDRESS Missy Johnson

Treasurer

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME ADDRESS DATE OF WITHDRAWAL

b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS Mohammed H Makhzoumi	TITLE Board of Directors	DATE OF TERMINATION 05/09/2014
Ryan Drant	Board of Directors	05/09/2014
Ben Sasse	Board of Directors	11/15/2013
Richard Whitney	Board of Directors	11/15/2013
L Douglas Hudson	Board of Directors	11/15/2013
David Katzman	Board of Directors	11/15/2013
Michael Iskra	Dirctor/Officer	11/01/2013
Jeremy Landa	Officer	01/31/2014
Jennifer Peters	Officer	11/01/2013
L Douglas Hudson	Officer	06/01/2013

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 Terry R Blankenship 5528 Hillview Dr Brentwood, TN 37027	DATE AND PURPOSE OF WITHDRAWAL 2013 W2 wages	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY 84,257.39
Tammy Fuqua 175 Clarendon Circle Franklin, TN 37069	2013 W2 wages	126,108.50
Rob Higgins 2008 Willowmet Lane Brentwood, TN 37027	2013 W2 wages	136,329.00

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NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR David Hill 401 Tinnan Ave Franklin, TN 37067	DATE AND PURPOSE OF WITHDRAWAL 2013 W2 wages	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY 46,855.37
Ellen Hitt 5021 Franklin Pike Nashville, TN 37220	2013 W2 wages	119,234.13
Douglas L Hudson 2304 Valley Brook Rd Nashville, TN 37215	2013 W2 wages	274,031.34
Dan Hunter 709 Heritage Dr Madison, TN 37115	2013 W2 wages	107,100.57
Michael Iskra 1316 State Boulevard Franklin, TN 37064	2013 W2 wages	278,472.04
Marianne Lamkin 2245 Seven Points Circle Hermitage, TN 37076	2013 W2 wages	72,996.06
Jeremy Landa 1382 Moonlight Trail Brentwood, TN 37027	2013 and 2014 W2 wages	286,172.40
Brian Lang 309 Applecross Dr Franklin, TN 37064	2013 W2 wages	84,543.16
Tiffany Miller-Kennedy 2864 Creekbend Dr Nashville, TN 37207	2013 W2 wages	50,955.23
Karen Musacchio 8041 Poplarwood Rd Nashville, TN 37221	2013 W2 wages	143,605.14
Jennifer Peters 2210 Sharondale Dr Nashville, TN 37215	2013 W2 wages	208,159.52
Tricia Smith 2125 Kenowick Ct Spring Hill, TN 37174	2013 W2 wages	101,266.43
Alyssia Syphers 605 Cobble Court Nashville, TN 37211	2013 W2 wages	17,751.64
Thomas Walters 3838 Williamette Dr Nashville, TN 37221	2013 W2 wages	220,512.02
Ryan Wettergren 9149 Carissa Dr Brentwood, TN 37027	2013 W2 wages	80,247.91
Blake Wylie 202 Green Valley Blvd Franklin, TN 37064	2013 W2 wages	27,822.42
Christopher Yancey 1351 Polo Fields Lane Columbia, TN 38401	2013 W2 wages	101,704.23

B7 (Official Form 7) (04/13) 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) Simplex Healthcare files a consolidated return and is the parent 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. TAXPAYER IDENTIFICATION NUMBER (EIN) NAME OF PENSION FUND Simplex Healthcare 401(k) Fund 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.

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

Signature

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

/s/ Gary M. Murphey

Gary M. Murphey President

Date May 15, 2014

United States Bankruptcy CourtMiddle District of Tennessee

In re	Simplex Healthcare, Inc.		Case No	
		Debtor(s)	Chapter	11
	DISCLOSURE OF COMPE			
(Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 20 compensation paid to me within one year before the filing rendered on behalf of the debtor(s) in contemplation	ng of the petition in bankrupt	cy, or agreed to be pa	id to me, for services rendered or to
	For legal services, I have agreed to accept		\$	32,811.50
	Prior to the filing of this statement I have received		\$	32,811.50
	Balance Due		\$	0.00 *
2.	The source of the compensation paid to me was: ■ Debtor □ Other (specify):	*as of petition date; of and expenses to be		post-petition fees cations by court approval.
3.	Γhe source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed comp	pensation with any other person	on unless they are me	mbers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the na			
5.	In return for the above-disclosed fee, I have agreed to re	ender legal service for all asp	ects of the bankruptcy	y case, including:
1	 Analysis of the debtor's financial situation, and render Preparation and filing of any petition, schedules, state Representation of the debtor at the meeting of credited [Other provisions as needed] 	tement of affairs and plan wh	ich may be required;	
6.	By agreement with the debtor(s), the above-disclosed fe Representation of the debtors in any discha adversary proceeding, or other litigation in	argeability actions, judicial	lien avoidances, rel	ief from stay actions or any other
		CERTIFICATION		
	certify that the foregoing is a complete statement of an ankruptcy proceeding.	y agreement or arrangement	for payment to me for	r representation of the debtor(s) in
Dated	l: May 15, 2014	/s/ Paul G. Jenn	ings	
		Paul G. Jenning	S	
		Bass, Berry & S 150 Third Ave. S		
		Suite 2800		
		Nashville, TN 37	7201 Fax: 615-742-6293	
<u> </u>		010-142-0200	1 U.A. 0 10-142-0233	

United States Bankruptcy CourtMiddle District of Tennessee

In re	Simplex Healthcare, Inc.		Case No.		
	·	Debtor	,		
			Chapter	11	

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 or place of business of holder	Security Class	Number of Securities	Kind of Interest	
Ben Sasse 1747 Laguna Drive Fremont, NE 68025	Common Stock	40,000		
Ben Sasse 1747 Laguna Drive Fremont, NE 68025	Series A Preferred Stock	101,113		
Blake Wylie 202 Green Valley Blvd Franklin, TN 37064	Common Stock	7,500		
Bro-Ad Energy, LLC c/o Senator Tom Adelson 2448 E 26th Place Tulsa, OK 74114	Series A Preferred Stock	403,576		
Christopher Weaver 1174 Glenbrook Dr Franklin, TN 37064	Common Stock	42,708		
David B. Katzman Revocable Trust Camelot Venture Group 27725 Stansbury Blvd, Suite 175 Farmington, MI 48334	Series A Preferred Stock	656,221		
David Katzman Camerlot Venture Group 27725 Stansbury Blvd, Suite 175 Farmington, MI 48334	Common Stock	40,000		
Dayna McAdams 1332 Sweetwater Drive Brentwood, TN 37027	Common Stock	5,417		
Ellen Hitt 5021 Franklin Pike Nashville, TN 37220	Common Stock	50,000		
Erin Moorman 280 Wisteria Drive Franklin, TN 37064	Common Stock	5,312		

Debtor

LIST OF EQUITY SECURITY HOLDERS (Continuation Sheet)

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest	
Jennifer C Peters 2210 Sharondale Drive Nashville, TN 37215	Common Stock	362,784		
Jeremy J Landa 1382 Moonlight Trail Brentwood, TN 37027	Common Stock	362,784		
Keith Glatzer 233 Williamsburg Cir Brentwood, TN 37027	Common Stock	83,334		
Kelly Heard 1004 Rolling Meadows Drive Mount Juliet, TN 37122	Common Stock	6,875		
L Douglas Hudson 2304 Valley Brook Road Nashville, TN 37215	Common Stock	4,261,304		
L Douglas Hudson 2304 Valley Brook Road Nashville, TN 37215	Series A Preferred Stock	492,166		
Larson Blaine Hudson 2095 Quail Run Drive Bowling Green, KY 42104	Series A Preferred Stock	310,722		
Leigh Anne Ellis 605 West 13th Street Laurel, MS 39440	Common Stock	4,167		
Lori S. Richardson Pelliccioni 9663 Santa Monica Blvd, No 648 Beverly Hills, CA 90210	Common Stock	338,743		
Michael S. Iskra 1316 State Blvd Franklin, TN 37064	Common Stock	1,282,105		
Mohamad H. Makhzoumi New Entrprise Associates 2855 Sand Hill Road Menlo Park, CA 94025	Series A Preferred Stock	30,354		
NEA Ventures 2007, L.P. 1954 Greenspring Drive, Suite 600 Lutherville Timonium, MD 21093	Series A Preferred Stock	27,890		

Case No.
Case No.

Debtor

LIST OF EQUITY SECURITY HOLDERS (Continuation Sheet)

Name and last known address	Security	Number	Kind of
or place of business of holder	Class	of Securities	Interest
New Enterprise Associates 12, LP 1954 Greenspring Drive, Suite 600 Lutherville Timonium, MD 21093	Series A Preferred Stock	20,962.787	
Richard Pinson 1490 Willowbrooke Circle Franklin, TN 37069	Common Stock	1,562,503	
Richard Pinson 1490 Willowbrooke Circle Franklin, TN 37069	Series A Preferred Stock	807,317	
Richard Whitney Whitney Capital LLC 624 Ninth Street Manhattan Beach, CA 90266	Common Stock	40,000	
Rick Fuqua 175 Clarendon Cir Franklin, TN 37069	Common Stock	50,000	
Terry R. Blankenship 5528 Hillview Drive Brentwood, TN 37027	Common Stock	272,088	
Thomas R. Walters 3828 Williamette Drive Nashville, TN 37221	Common Stock	272,088	
TriplePoint Capital LLC c/o Kevin Thorne 2420 Sand Hill Road Menlo Park, CA 94025	Series A Preferred Stock	245,223	
Whitney Capital Investors 4, LLC c/o Rich Whitney 624 Ninth Street Manhattan Beach, CA 90266	Series A Preferred Stock	981,089	

In re	Simplex Healthcare, Inc.		Case No.	
-		Debtor		

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

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

Date_	May 15, 2014	Signature_/s/ Gary M. Murphey	
		Gary M. Murphey	
		President	

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

United States Bankruptcy CourtMiddle District of Tennessee

In re	Simplex Healthcare, Inc.		Case No.						
		Debtor(s)	Chapter	11					
	VERIFICATION OF CREDITOR MATRIX								
I, the President of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct									
to the best of my knowledge.									
to the be	est of my knowledge.								
Date:	May 15, 2014	/s/ Gary M. Murphey							
		Gary M. Murphey/President							
		Signer/Title							

SIMPLEX HEALTHCARE, INC. C/O RESURGENCE FINANCIAL SERVICES, LLC PO BOX 2255 MOUNT JULIET TN 37121

PAUL G JENNINGS BASS BERRY & SIMS PLC 150 THIRD AVE S SUITE 2800 NASHVILLE TN 37201

AARON C BENNETT 1121 WAVERLY PLACE FRANKLIN TN 37067

ABILITY NETWORK INC 100 6TH ST NORTH SUITE 900A MINNEAPOLIS MN 55403

ACCOUNTTEMPS 21925 FIELD PARKWAY SUITE 100 DEER PARK IL 60010

ADP ONE ADP DR MS-100 AUGUSTA GA 30909

ADP SCREENING AND SELECTION SERVICES P.O. BOX 645177 CINCINNATI OH 45264-5177

ADVANCED NETWORK SOLUTIONS 820 PALMER PLACE NASHVILLE TN 37203

ALABAMA STATE BOARD OF PHARMACY P.O. BOX 381988 BIRMINGHAM AL 35238-2330

ALEXA E RITER 13306 CROWNE BROOK CIRCLE FRANKLIN TN 37067

ALL NEW REFURBISHING PO BOX 116719 ATLANTA GA 30368

ALLEN LYTTLE 5651 HICKORY PARK DR CANE RIDGE TN 37013 ALYSSIA A A SYPHERS 605 COBBLE COURT NASHVILLE TN 37211

AMANDA HOOD 2978 DUPLEX RD SPRING HILL TN 37174

AMERICAN HEALTH DATA SERVICES INC 2220 COIT RD SUITE 480-139 PLANO TX 75075

AMY KRANICK RD 3255 LOCUST HOLLOW NOLENSVILLE TN 37135

ANDREA D CLAYBROOKS 901 VILLAGE HILLS DR NASHVILLE TN 37217

ANDREW HATTON 2605 SANDY DRIVE NASHVILLE TN 37216

ANGELIQUE D D MORENO 903 N 12TH ST. APT 15 NASHVILLE TN 37206

APERTURA INC PO BOX 1304 LAVERGNE TN 37086

ARMSTRONG TEASDALE 7700 FORSYTH BVD SUITE 1800 ST LOUIS MO 63105

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AT&T 503 PO BOX 5019 CAROL STEAM IL 60197-5019

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AT&T 733032 VATIKA TRIANGLE 3RD FLOOR SUSHANT LOK-1 BLOCK A MG ROAD GURGAON-122022 HARYANA INDIA

AT&T MOBILITY PO BOX 6463 CAROL STEAM IL 60197-6463

AT&T PRO CABS PO BOX 105373 ATLANTA GA 30348

AT&T VP04JZ PO BOX 5091 CAROL STREAM IL 60197

A-Z DIABETES CARE CLUB LLC PO BOX 2255 MOUNT JULIET TN 37121

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BLUE CROSS BLUE SHIELD TN RECEIPTS DEPARTMENT P.O. BOX 6539 CAROL STREAM IL 60197-6539 BRADLEY ARANT BOULT CUMMINGS LLP P.O. BOX 340025 NASHVILLE TN 37203-0025

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CANDACE BURTON 1184 CYNTHIA LANE SPRING HILL TN 37174

CAPITAL FILING SERVICES INC 992 DAVIDSON DR SUITE B NASHVILLE TN 37205

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CAROLYN STATEN 800 MULBERRY DRIVE COLUMBIA TN 38401 CHRISTIANSON BUSINESS PRODUCTS, INC. 2690 MEMORIAL BLVD SUITE E4 MURFREESBORO TN 37129

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HRLP RIVERWOOD LLC C/O HIGHWOODS PROPERTIES INC NASHVILLE TN 37203 3332 WEST END AVE SUITE 600 IBM GLOBAL PROCESS SERVICES ROUTE 100 SOMERS NY 10589

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XPEDITE SYSTEMS PO BOX 116451 ATLANTA GA 30368-6451

United States Bankruptcy CourtMiddle District of Tennessee

In re	Simplex Healthcare, Inc.		Case No.	
		Debtor(s)	Chapter	11
CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)				
recusa a (are)	ant to Federal Rule of Bankruptcy Prol, the undersigned counsel for Simple corporation(s), other than the debtor of the corporation's(s') equity interests	ex Healthcare, Inc. in the above car or a governmental unit, that direc	aptioned action, of	pertifies that the following is own(s) 10% or more of any
■ Nor	ne [Check if applicable]			
May 1	5, 2014	/s/ Paul G. Jennings		
Date		Paul G. Jennings Signature of Attorney or Litig Counsel for Simplex Healthca Bass, Berry & Sims PLC 150 Third Ave. S. Suite 2800 Nashville, TN 37201 615-742-6200 Fax:615-742-6293	are, Inc.	