

Fill in this information to identify your case:

United States Bankruptcy Court for the:

DISTRICT OF SOUTH CAROLINA

Case number (if known) Chapter 11

☐ Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

4/19

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name	Sand Castle South Timeshare Owners Association, Inc.	
2. All other names debtor used in the last 8 years Include any assumed names, trade names and doing business as names		
3. Debtor's federal Employer Identification Number (EIN)	26-0350452	
4. Debtor's address	Principal place of business 2207 South Ocean Blvd Myrtle Beach, SC 29577 Number, Street, City, State & ZIP Code Horry County	Mailing address, if different from principal place of business One Vance Gap Road Asheville, NC 28805 P.O. Box, Number, Street, City, State & ZIP Code Location of principal assets, if different from principal place of business Number, Street, City, State & ZIP Code
5. Debtor's website (URL)		
6. Type of debtor	<input checked="" type="checkbox"/> Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP)) <input type="checkbox"/> Partnership (excluding LLP) <input type="checkbox"/> Other. Specify:	

Debtor Sand Castle South Timeshare Owners Association, Inc. Case number (if known) _____
Name**7. Describe debtor's business** A. *Check one:*

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☒ None of the above

B. *Check all that apply*

- ☒ Tax-exempt entity (as described in 26 U.S.C. §501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.
See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

7211**8. Under which chapter of the Bankruptcy Code is the debtor filing?** *Check one:*

- ☐ Chapter 7
- ☐ Chapter 9

☒ Chapter 11. *Check all that apply:*

- ☒ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,725,625 (amount subject to adjustment on 4/01/22 and every 3 years after that).
- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?** ☒ No.
☐ Yes.

If more than 2 cases, attach a separate list.

District _____	When _____	Case number _____
District _____	When _____	Case number _____

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor? ☒ No.
☐ Yes.

List all cases. If more than 1, attach a separate list

Debtor _____	Relationship _____
District _____	When _____ Case number, if known _____

Debtor **Sand Castle South Timeshare Owners Association, Inc.** Case number (if known) _____
 Name

11. Why is the case filed in this district?

Check all that apply:

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

☒ No

☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (Check all that apply.)

☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard? _____

☐ It needs to be physically secured or protected from the weather.

☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

☐ Other _____

Where is the property? _____

Number, Street, City, State & ZIP Code

Is the property insured?

☐ No

☐ Yes. Insurance agency _____

Contact name _____

Phone _____

Statistical and administrative information

13. Debtor's estimation of available funds

Check one:

- ☒ Funds will be available for distribution to unsecured creditors.
- ☐ After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors

☒ 1-49

☐ 50-99

☐ 100-199

☐ 200-999

☐ 1,000-5,000

☐ 5,001-10,000

☐ 10,001-25,000

☐ 25,001-50,000

☐ 50,001-100,000

☐ More than 100,000

15. Estimated Assets

☐ \$0 - \$50,000

☐ \$50,001 - \$100,000

☒ \$100,001 - \$500,000

☐ \$500,001 - \$1 million

☐ \$1,000,001 - \$10 million

☐ \$10,000,001 - \$50 million

☐ \$50,000,001 - \$100 million

☐ \$100,000,001 - \$500 million

☐ \$500,000,001 - \$1 billion

☐ \$1,000,000,001 - \$10 billion

☐ \$10,000,000,001 - \$50 billion

☐ More than \$50 billion

16. Estimated liabilities

☐ \$0 - \$50,000

☐ \$50,001 - \$100,000

☐ \$100,001 - \$500,000

☒ \$500,001 - \$1 million

☐ \$1,000,001 - \$10 million

☐ \$10,000,001 - \$50 million

☐ \$50,000,001 - \$100 million

☐ \$100,000,001 - \$500 million

☐ \$500,000,001 - \$1 billion

☐ \$1,000,000,001 - \$10 billion

☐ \$10,000,000,001 - \$50 billion

☐ More than \$50 billion

Debtor **Sand Castle South Timeshare Owners Association, Inc.**
Name Case number (if known)**Request for Relief, Declaration, and Signatures****WARNING --** Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**17. Declaration and signature
of authorized
representative of debtor**

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

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **May 22, 2019**
MM / DD / YYYY**X /s/ Herbert H. Patrick, Jr.**
Signature of authorized representative of debtor

Title **President****Herbert H. Patrick, Jr.**
Printed name**18. Signature of attorney****X /s/ Julio E. Mendoza, Jr.**
Signature of attorney for debtorDate **May 22, 2019**
MM / DD / YYYY**Julio E. Mendoza, Jr. 3365**
Printed name**Nexsen Pruet, LLC**
Firm name**1230 Main Street, Suite 700 (29201)
PO Box 2426
Columbia, SC 29202**
Number, Street, City, State & ZIP CodeContact phone **803-540-2026**Email address **rmendoza@nexsenpruet.com****3365 SC**

Bar number and State

Resolution of Board of Directors
of
Sand Castle South Timeshare Owners Association, Inc.

Whereas, it is in the best interest of this corporation to file a voluntary petition in the the United States Bankruptcy Court pursuant to Chapter 11 of Title 11 of the United States Code;

Be It Therefore Resolved, that **Herbert H. Patrick, Jr., President** of this Corporation, is authorized and directed to execute and deliver all documents necessary to perfect the filing of a chapter 11 voluntary bankruptcy case on behalf of the corporation; and

Be It Further Resolved, that **Herbert H. Patrick, Jr., President** of this Corporation is authorized and directed to appear in all bankruptcy proceedings on behalf of the corporation, and to otherwise do and perform all acts and deeds and to execute and deliver all necessary documents on behalf of the corporation in connection with such bankruptcy case, and

Be It Further Resolved, that **Herbert H. Patrick, Jr., President** of this Corporation is authorized and directed to employ **Julio E. Mendoza, Jr. 3365**, attorney and the law firm of **Nexsen Pruet, LLC** to represent the corporation in such bankruptcy case.

Date 5/22/19

Signed Herbert H. Patrick, Jr.

Date 5/22/19

Signed Kyle Smith

Date 5/22/19

Signed [Signature]

United States Bankruptcy Court
District of South Carolina

In re **Sand Castle South Timeshare Owners Association, Inc.**
Debtor(s)

Case No. _____
Chapter **11**

STATEMENT REGARDING AUTHORITY TO SIGN AND FILE PETITION

I, **Herbert H. Patrick, Jr.**, declare under penalty of perjury that I am the **President** of **Sand Castle South Timeshare Owners Association, Inc.**, and that the following is a true and correct copy of the resolutions adopted by the Board of Directors of said corporation at a special meeting duly called and held on the ___ day of __, 20__.

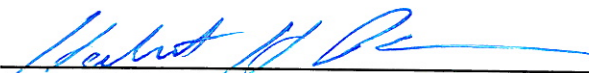
"Whereas, it is in the best interest of this corporation to file a voluntary petition in the United States Bankruptcy Court pursuant to Chapter 11 of Title 11 of the United States Code;

Be It Therefore Resolved, that **Herbert H. Patrick, Jr.**, **President** of this Corporation, is authorized and directed to execute and deliver all documents necessary to perfect the filing of a chapter 11 voluntary bankruptcy case on behalf of the corporation; and

Be It Further Resolved, that **Herbert H. Patrick, Jr.**, **President** of this Corporation is authorized and directed to appear in all bankruptcy proceedings on behalf of the corporation, and to otherwise do and perform all acts and deeds and to execute and deliver all necessary documents on behalf of the corporation in connection with such bankruptcy case, and

Be It Further Resolved, that **Herbert H. Patrick, Jr.**, **President** of this Corporation is authorized and directed to employ **Julio E. Mendoza, Jr. 3365**, attorney and the law firm of **Nexsen Pruet, LLC** to represent the corporation in such bankruptcy case."

Date 5/22/19

Signed 
Herbert H. Patrick, Jr.

Fill in this information to identify the case:

Debtor name Sand Castle South Timeshare Owners Association, Inc.

United States Bankruptcy Court for the: DISTRICT OF SOUTH CAROLINA

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule*
- ☒ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on May 22, 2019

X /s/ Herbert H. Patrick, Jr.

Signature of individual signing on behalf of debtor

Herbert H. Patrick, Jr.

Printed name

President

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name **Sand Castle South Timeshare Owners Association, Inc.**
 United States Bankruptcy Court for the: **DISTRICT OF SOUTH CAROLINA**
 Case number (if known): _____

☐ Check if this is an amended filing

Official Form 204

Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders

12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Cherokee Motels, Inc. PO Box 1362 Myrtle Beach, SC 29578		Note Payment Due				\$360,000.00
Horry County Treasurer's Office PO Box 1237 Conway, SC 29528		Property Taxes Due				\$42,585.81
Johnson's Furniture Co. 3015 Bashor Road Conway, SC 29526		Goods Provided				\$608.22
Kaba Ilco Inc. PO Box 896502 Charlotte, NC 28289						\$892.82
Sand Castle South HOA Inc. c/o Alley Management Inc. 7400 N. Kings Highway Myrtle Beach, SC 29572		Master Association Dues Owed				\$130,934.69
Sun Hospitality Resort Services 4724 Hwy 17 Bypass South Myrtle Beach, SC 29588		Services Provided, Housekeeping				\$56,708.90
TSA Choice 108 Asheville Commerce Pkwy Candler, NC 28715		Services Provided				\$333.47

Fill in this information to identify the case:

Debtor name **Sand Castle South Timeshare Owners Association, Inc.**

United States Bankruptcy Court for the: **DISTRICT OF SOUTH CAROLINA**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. Real property: Copy line 88 from <i>Schedule A/B</i>	\$	0.00
1b. Total personal property: Copy line 91A from <i>Schedule A/B</i>	\$	61,615.55
1c. Total of all property: Copy line 92 from <i>Schedule A/B</i>	\$	61,615.55

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i>	\$	0.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)		
3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i>	\$	42,585.81
3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i>	+\$	783,925.24
4. Total liabilities Lines 2 + 3a + 3b	\$	826,511.05

Fill in this information to identify the case:

Debtor name Sand Castle South Timeshare Owners Association, Inc.

United States Bankruptcy Court for the: DISTRICT OF SOUTH CAROLINA

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- ☐ No. Go to Part 2.
☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

2. **Cash on hand**

\$300.00

3. **Checking, savings, money market, or financial brokerage accounts** (Identify all)

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. **Fifth Third**

Operating

5290

\$61,315.55

4. **Other cash equivalents** (Identify all)

5. **Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$61,615.55

Part 2: Deposits and Prepayments

6. Does the debtor have any deposits or prepayments?

- ☒ No. Go to Part 3.
☐ Yes Fill in the information below.

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

- ☐ No. Go to Part 4.
☒ Yes Fill in the information below.

11. **Accounts receivable**

Debtor **Sand Castle South Timeshare Owners Association, Inc.** Case number (If known) _____
Name _____

11b. Over 90 days old: 2,153,327.66 - Unknown =.... Unknown
face amount doubtful or uncollectible accounts

12. **Total of Part 3.**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

Unknown

Part 4: Investments

13. Does the debtor own any investments?

- ☒ No. Go to Part 5.
☐ Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☒ No. Go to Part 6.
☐ Yes Fill in the information below.

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.
☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☒ No. Go to Part 8.
☐ Yes Fill in the information below.

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☒ No. Go to Part 9.
☐ Yes Fill in the information below.

Part 9: Real property

54. Does the debtor own or lease any real property?

- ☐ No. Go to Part 10.
☒ Yes Fill in the information below.

55. **Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest**

Description and location of property

Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available.

Nature and extent of debtor's interest in property

Net book value of debtor's interest (Where available)

Valuation method used for current value

Current value of debtor's interest

Debtor	Sand Castle South Timeshare Owners Association, Inc.	Case number (If known)
	Name	
55.1.	39 Timeshare units located at 2207 South Ocean Blvd, Myrtle Beach, South Carolina 29577 (Units Numbered 901, 902, 903, 904, 905, 906, 907, 908, 909, 910, 911, 912, 914, 915, 916, 917, 918, 919, 920, 921, 1101, 1102, 1103, 1104, 1105, , 1106, 1107, 1108, 1109, 1110, 1111, 1112, 1114, 1115, 1116, 1117, 1118, 1119, 1120 and 1121 of the Sand Castle South Horizontal Property Regime). SEE ATTACHED LEGAL DESCRIPTION	Unknown
	DESCRIPTION	Unknown

56.	Total of Part 9. Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.	Unknown
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57. **Is a depreciation schedule available for any of the property listed in Part 9?**

- ☒ No
☐ Yes

58. **Has any of the property listed in Part 9 been appraised by a professional within the last year?**

- ☒ No
☐ Yes

Part 10: Intangibles and intellectual property

59. **Does the debtor have any interests in intangibles or intellectual property?**

- ☐ No. Go to Part 11.
☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60.	Patents, copyrights, trademarks, and trade secrets			
61.	Internet domain names and websites			
62.	Licenses, franchises, and royalties Sand Castle South Timeshare Ownership Plan License (SC REC File No. 905)	Unknown		Unknown

63. **Customer lists, mailing lists, or other compilations**

64. **Other intangibles, or intellectual property**

65. **Goodwill**

Debtor **Sand Castle South Timeshare Owners Association, Inc.**
Name

Case number (If known)

66. **Total of Part 10.**

Add lines 60 through 65. Copy the total to line 89.

Unknown

67. **Do your lists or records include personally identifiable information of customers** (as defined in 11 U.S.C. §§ 101(41A) and 107?)

- ☐ No
☒ Yes

68. **Is there an amortization or other similar schedule available for any of the property listed in Part 10?**

- ☒ No
☐ Yes

69. **Has any of the property listed in Part 10 been appraised by a professional within the last year?**

- ☒ No
☐ Yes

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☒ No. Go to Part 12.
☐ Yes Fill in the information below.

Debtor **Sand Castle South Timeshare Owners Association, Inc.** Case number (If known)
 Name _____

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	\$61,615.55	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$0.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	Unknown	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$0.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$0.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$0.00	
88. Real property. <i>Copy line 56, Part 9.....></i>		Unknown
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	Unknown	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ \$0.00	
91. Total. Add lines 80 through 90 for each column	\$61,615.55	+ 91b. \$0.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$61,615.55

Debtor **Sand Castle South Timeshare Owners Association, Inc.**
Name

Case number (If known)

LEGAL DESCRIPTION OF PROPERTY

ALL AND SINGULAR, those certain Units Numbered 901, 902, 903, 904, 905, 906, 907, 908, 909, 910, 911, 912, 914, 915, 916, 917, 918, 919, 920, 921, 1101, 1102, 1103, 1104, 1105, 1106, 1107, 1108, 1109, 1110, 1111, 1112, 1114, 1115, 1116, 1117, 1118, 1119, 1120, and 1121 of the Sand Castle South Horizontal Property Regime, established pursuant to the Master Deed for Sand Castle South Horizontal Property Regime, dated June 16, 2006 and recorded June 16, 2006 in Deed Book 3114 at Page 478, in the records of Horry County, South Carolina.

SUBJECT to all of the provisions of the aforesaid Master Deed and Exhibits and Amendments thereto.

AND SUBJECT to all other restrictions, reservations, easements, and rights of way or record, including those set out on the recorded map.

AND FURTHER SUBJECT to all of the provisions of the Supplemental Declaration for Sand Castle South Timeshare Ownership Plan recorded in Deed Book 3255 at Page 567, et. seq., in the records of Horry County, South Carolina.

TOGETHER will all of the appurtenances thereto according the Master Deed, the Supplemental Declaration for Sand Castle South Timeshare Ownership Plan and Exhibits and Amendments thereto, and the Grantee assumes and agrees to observe and perform its obligations under the Master Deed and Supplemental Declaration for Sand Castle South Timeshare Ownership Plan and Exhibits and Amendments thereto, including, but not limited to, the payment of assessments for the maintenance and operation of the units, condominiums and timeshare interests. AND SUBJECT to the provisions of the By-Laws of Sand Castle South Homeowner's Association, Inc. and the By-Laws of Sand Castle South Timeshare Owners Association, Inc.

This being a portion of the property conveyed to Sand Castle South Condo, LLC by Deed of Cherokee Motels, Inc., recorded June 16, 2006 in Deed Book 3114 at Page 462, in the Office of the Register of Deeds for Horry County, South Carolina.

TMS No.: 187-01-02-078; 187-01-02-079; 187-01-02-080; 187-01-02-081; 187-01-02-082; 187-01-02-083; 187-01-02-084; 187-01-02-085; 187-01-02-086; 187-01-02-087; 187-01-02-088; 187-01-02-089; 187-01-02-90; 187-01-02-091; 187-01-02-092; 187-01-02-093; 187-01-02-094; 187-01-02-095; 187-01-02-096; 187-01-02-097; 187-01-02-218; 187-01-02-219; 187-01-02-220; 187-01-02-221; 187-01-02-222; 187-01-02-223; 187-01-02-224; 187-

01-02-225; 187-01-02-226; 187-01-02-227; 187-01-02-228; 187-01-02-229;
187-01-02-230; 187-01-02-231; 187-01-02-232; 187-01-02-233; 187-01-02-
234; 187-01-02-235; 187-01-02-236 and 187-01-02-237

LESS AND EXCEPTING:

Any previously conveyed timeshare interest in the above referenced Units,
consisting of a 1/52 or a 1/104 undivided interest.

Fill in this information to identify the case:

Debtor name **Sand Castle South Timeshare Owners Association, Inc.**

United States Bankruptcy Court for the: **DISTRICT OF SOUTH CAROLINA**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☒ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☐ Yes. Fill in all of the information below.

Fill in this information to identify the case:

Debtor name **Sand Castle South Timeshare Owners Association, Inc.**

United States Bankruptcy Court for the: **DISTRICT OF SOUTH CAROLINA**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.

☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount
2.1	<p>Priority creditor's name and mailing address</p> <p>Horry County Treasurer's Office PO Box 1237 Conway, SC 29528</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Property Taxes Due</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>\$42,585.81</p> <p>\$42,585.81</p>

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	<p>Nonpriority creditor's name and mailing address</p> <p>Celso Aabano 1658 Milwaukee Ave #100-8053 Chicago, IL 60647</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 8570</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: NOTICE PURPOSES ONLY</p> <p>Unit Type: 1 BD; Unit 1120 (Biannual Float)</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>\$0.00</p>
3.2	<p>Nonpriority creditor's name and mailing address</p> <p>James Adams 3730 Meadowview Rd Kershaw, SC 29067</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 6715</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: NOTICE PURPOSES ONLY</p> <p>Unit Type: STU; Unit: 903 (Biannual Float)</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>\$0.00</p>

Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known) _____
Name _____		
3.3	Nonpriority creditor's name and mailing address Joshua Adams PO Box 382 Chapmanville, NC 28133 Date(s) debt was incurred _____ Last 4 digits of account number <u>6716</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 919 (Annual Float)</u> Unit Type: <u>STU; Unit: 907 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.4	Nonpriority creditor's name and mailing address Samuel Adams 5513 Ackley Ln Hope Mills, NC 28348 Date(s) debt was incurred _____ Last 4 digits of account number <u>6717</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 909 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.5	Nonpriority creditor's name and mailing address William Addison 1722 McFarlin Bridge Rd Carnesville, GA 30521 Date(s) debt was incurred _____ Last 4 digits of account number <u>6719</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1BD; Unit: 918 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.6	Nonpriority creditor's name and mailing address Jae Adle PO Box 52 Lyons, NY 14489 Date(s) debt was incurred _____ Last 4 digits of account number <u>6721</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 902 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.7	Nonpriority creditor's name and mailing address Denorise Allen 2543 Old Mill Road High Point, NC 27265 Date(s) debt was incurred _____ Last 4 digits of account number <u>6725</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 1108 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.8	Nonpriority creditor's name and mailing address Pamela Allen 1261 McPherson Rd Vass, NC 28327 Date(s) debt was incurred _____ Last 4 digits of account number <u>6726</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 903 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Sand Castle South Timeshare Owners Association, Inc. Name _____	Case number (if known) _____
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3.9	Nonpriority creditor's name and mailing address Vernon Allison 7700 Boyer Farm Rd Walnut Cove, NC 27052 Date(s) debt was incurred _____ Last 4 digits of account number <u>6727</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: NOTICE PURPOSES ONLY Unit Type: 1 BD; Unit: 917 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.10	Nonpriority creditor's name and mailing address Ronald Althenn, II 3905 Hearn Drive Columbia, SC 29223 Date(s) debt was incurred _____ Last 4 digits of account number <u>6728</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: NOTICE PURPOSES ONLY Unit Type: STU; Unit 1108 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.11	Nonpriority creditor's name and mailing address Michael Ammons 2645 Mozelle Sherrill Ln Denver, NC 28037 Date(s) debt was incurred _____ Last 4 digits of account number <u>6730</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: NOTICE PURPOSES ONLY Unit Type: STU; Unit: 904 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.12	Nonpriority creditor's name and mailing address Howard Anderson 1000 Louis Gardner Rd Upton, KY 42784 Date(s) debt was incurred _____ Last 4 digits of account number <u>8630</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: NOTICE PURPOSES ONLY Unit Type: STU; Unit 907 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.13	Nonpriority creditor's name and mailing address Jeffrey Anderson 2641 Sudie Dr Burlington, NC 27217 Date(s) debt was incurred _____ Last 4 digits of account number <u>6731</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: NOTICE PURPOSES ONLY Unit Type: 1 BD; Unit: 916 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.14	Nonpriority creditor's name and mailing address Shawntay Anthony 911 Belton street Monroe, NC 28110 Date(s) debt was incurred _____ Last 4 digits of account number <u>6732</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: NOTICE PURPOSES ONLY Unit Type: STU; Unit 1109 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known) _____
Name _____		
3.15	Nonpriority creditor's name and mailing address Kalyan Anumula 1278 Turnbury Lane North Wales, PA 19454 Date(s) debt was incurred _____ Last 4 digits of account number <u>6733</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 901 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.16	Nonpriority creditor's name and mailing address Diane Artis 31230 Smiths Ferry Road Franklin, VA 23851 Date(s) debt was incurred _____ Last 4 digits of account number <u>6734</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 920 (Biannual Float) Unit Type: STU; Unit 908 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.17	Nonpriority creditor's name and mailing address Sam Atkins, Jr. 732 Indian Trl Martinsville, VA 24112 Date(s) debt was incurred _____ Last 4 digits of account number <u>6736</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 915 (Annual Float) Unit Type: STU; Unit: 914 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.18	Nonpriority creditor's name and mailing address Robbie Atkins 228 Charles Ave High Point, NC 27260 Date(s) debt was incurred _____ Last 4 digits of account number <u>6735</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit 904 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.19	Nonpriority creditor's name and mailing address Larry Atkinson 3840 Hedgewood Dr Sumter, SC 29154 Date(s) debt was incurred _____ Last 4 digits of account number <u>7518</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 908 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known) _____
Name _____		
3.20	Nonpriority creditor's name and mailing address Linda Atkinson 1201 Mill St Camden, SC 29020 Date(s) debt was incurred _____ Last 4 digits of account number <u>2506</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 906 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.21	Nonpriority creditor's name and mailing address Roy Ayers 2007 Westfield Rd Mount Airy, NC 27030 Date(s) debt was incurred _____ Last 4 digits of account number <u>6737</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit: <u>1 BD; Unit: 915 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.22	Nonpriority creditor's name and mailing address Isaac Bacoat 1904 Carriage House Road Fayetteville, NC 28312-3401 Date(s) debt was incurred _____ Last 4 digits of account number <u>6027</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 906 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.23	Nonpriority creditor's name and mailing address Richard Bailey, Jr. 135 Dogwood Ln Fayetteville, WV 25840 Date(s) debt was incurred _____ Last 4 digits of account number <u>6740</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 918 (Biannual Float)</u> Unit Type: <u>1 BD; Unit 919 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.24	Nonpriority creditor's name and mailing address Nicholas Bailey 1920 Old Hickory Grove Rd Mount Holly, NC 28120 Date(s) debt was incurred _____ Last 4 digits of account number <u>6739</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 901 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.25	Nonpriority creditor's name and mailing address Luis Baires 3407 Skybrook Ln Durham, NC 27703 Date(s) debt was incurred _____ Last 4 digits of account number <u>6741</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 911 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known) _____
Name _____		
3.26	Nonpriority creditor's name and mailing address Zakiya Y. Bakari-Griffin 192 Clayton Ave Frankford, DE 19945 Date(s) debt was incurred _____ Last 4 digits of account number <u>6742</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 908 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.27	Nonpriority creditor's name and mailing address Tammy Baker 397 Simms St Maysville, GA 30558 Date(s) debt was incurred _____ Last 4 digits of account number <u>6743</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 912 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.28	Nonpriority creditor's name and mailing address Shirley Ballard 17605 Highway 101 S Gray Court, SC 29645 Date(s) debt was incurred _____ Last 4 digits of account number <u>6746</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 902 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.29	Nonpriority creditor's name and mailing address James Baltzell 32 Newton St. Norwich, CT 06360 Date(s) debt was incurred _____ Last 4 digits of account number <u>6748</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit:1115 (Biennial Points)</u> Unit Type: <u>STU; Unit 1114 (iennial Points)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.30	Nonpriority creditor's name and mailing address Linda Bangs 100 Forest Park Dr North Kingstown, RI 02852 Date(s) debt was incurred _____ Last 4 digits of account number <u>6749</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1BD; Unit: 1117 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.31	Nonpriority creditor's name and mailing address Leonard Banks 713 Buffalo View Rd Hillsville, VA 24343 Date(s) debt was incurred _____ Last 4 digits of account number <u>6750</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 903 (Biennial Points)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known)
Name		
3.32	Nonpriority creditor's name and mailing address Bryan Barber 134 Deerfield Rd Rockingham, NC 28379 Date(s) debt was incurred ____ Last 4 digits of account number <u>6751</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 902 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.33	Nonpriority creditor's name and mailing address Connie Barrington 3166 Magnolia Rd Bennettsville, SC 29512 Date(s) debt was incurred ____ Last 4 digits of account number <u>6754</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 916 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.34	Nonpriority creditor's name and mailing address Robert Beatty 884 Hills Rd Belmont, NC 28012 Date(s) debt was incurred ____ Last 4 digits of account number <u>6755</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 904 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.35	Nonpriority creditor's name and mailing address Arleathia Beavers PO Box 314 Greeleyville, SC 29056 Date(s) debt was incurred ____ Last 4 digits of account number <u>6756</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 912 (Annual Float)</u> Unit Type: <u>1 BD; Unit: 918 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.36	Nonpriority creditor's name and mailing address Erica Renee Beckett 129 Willow Bend Dr Apt 3C Owings Mills, MD 21117 Date(s) debt was incurred ____ Last 4 digits of account number <u>6757</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 904 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known)
Name		
3.37	Nonpriority creditor's name and mailing address Paul Beeson 110 English Court Trinity, NC 27370 Date(s) debt was incurred _____ Last 4 digits of account number <u>6758</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 905 (Annual Float)</u> Unit Type: <u>1BD; Unit 918 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.38	Nonpriority creditor's name and mailing address Andre Belisle 145 Chaplin St Chaplin, CT 06235 Date(s) debt was incurred _____ Last 4 digits of account number <u>6759</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 907 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.39	Nonpriority creditor's name and mailing address Daniel Bell 376 Hollywood Farm Rd Fredericksburg, VA 22405 Date(s) debt was incurred _____ Last 4 digits of account number <u>6760</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 915 (Annual Float)</u> Unit Type: <u>STU; Unit: 914 (Annual Float)</u> Unit Type: <u>1 BD; Unit: 901 (Biannual Float)</u> Unit Type: <u>1 BD; Unit: 919 (Annual Float) (2)</u> Unit Type: <u>STU; Unit: 905 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.40	Nonpriority creditor's name and mailing address Alexis Bennett 541 Apple Ridge Road Greensboro, NC 27406 Date(s) debt was incurred _____ Last 4 digits of account number <u>6762</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 916 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.41	Nonpriority creditor's name and mailing address Christopher Bennett 116 Copes Ct Rock Hill, SC 29732 Date(s) debt was incurred _____ Last 4 digits of account number <u>6763</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 903 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.42	Nonpriority creditor's name and mailing address Gary Berry 114 Zoe Cir Jacksboro, TN 37757 Date(s) debt was incurred _____ Last 4 digits of account number <u>6765</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 914 (Biannual Float) Unit Type: 1 BD; Unit: 915 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.43	Nonpriority creditor's name and mailing address Levente Berry 7521 Blacklick Ridge Blvd Blacklick, OH 43004 Date(s) debt was incurred _____ Last 4 digits of account number <u>6766</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 1104 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.44	Nonpriority creditor's name and mailing address Richard Berry 131 Old Turnpike Rd Beckley, WV 25801 Date(s) debt was incurred _____ Last 4 digits of account number <u>6767</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 905 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.45	Nonpriority creditor's name and mailing address Barbara Bielawski 12645 W Eden Ct New Berlin, WI 53151 Date(s) debt was incurred _____ Last 4 digits of account number <u>6770</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 918 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.46	Nonpriority creditor's name and mailing address Cynthia Billington 2044 Halifax Rd Chatham, VA 24531 Date(s) debt was incurred _____ Last 4 digits of account number <u>6771</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit 901 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.47	Nonpriority creditor's name and mailing address Cheryl Ann Black 178 Lancer Dr Ringgold, GA 30736 Date(s) debt was incurred _____ Last 4 digits of account number <u>6773</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit 903 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.48	Nonpriority creditor's name and mailing address William Black 210 Vernon St Cherryville, NC 28021 Date(s) debt was incurred _____ Last 4 digits of account number <u>6774</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 916 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.49	Nonpriority creditor's name and mailing address William Blackwell 4107 SE School Rd Greensboro, NC 27406 Date(s) debt was incurred _____ Last 4 digits of account number <u>6775</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 1103 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.50	Nonpriority creditor's name and mailing address Latoya Blair 15 Kay Ln, Apt J Waterbury, CT 06708 Date(s) debt was incurred _____ Last 4 digits of account number <u>6776</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 914 (Biannual Float)</u> Unit Type: <u>1 BD; Unit: 915 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.51	Nonpriority creditor's name and mailing address Louis Blake, Jr. PO Box 1516 Saint Stephen, SC 29479 Date(s) debt was incurred _____ Last 4 digits of account number <u>6777</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 907 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.52	Nonpriority creditor's name and mailing address Cassandra Bland PO Box 17612 Greenville, SC 29606 Date(s) debt was incurred _____ Last 4 digits of account number <u>6778</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 921 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.53	Nonpriority creditor's name and mailing address Jimmie Blankenship, Jr. 2525 Stroud Rd Jackson, GA 30233 Date(s) debt was incurred _____ Last 4 digits of account number <u>6779</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 920 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.54	Nonpriority creditor's name and mailing address Susan Blevins 1204 Osborne Rd Mount Sterling, KY 40353 Date(s) debt was incurred _____ Last 4 digits of account number <u>6780</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 901 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.55	Nonpriority creditor's name and mailing address Tracy Bodkin 119 Wimbledon Way Murrells Inlet, SC 29576 Date(s) debt was incurred _____ Last 4 digits of account number <u>6781</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit 906 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.56	Nonpriority creditor's name and mailing address Norman Bogard 14362 US Highway 42 E Verona, KY 41092 Date(s) debt was incurred _____ Last 4 digits of account number <u>6782</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit 901 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.57	Nonpriority creditor's name and mailing address James Bogart 5707 Dogwood Rd Knoxville, TN 37978 Date(s) debt was incurred _____ Last 4 digits of account number <u>6783</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit 1115 (Biannual Float) Unit Type: STU; Unit 1114 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.58	Nonpriority creditor's name and mailing address Jason Bolin 3995 Meadow Run Rd Waverly, OH 45690 Date(s) debt was incurred _____ Last 4 digits of account number <u>6784</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 920 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.59	Nonpriority creditor's name and mailing address Ralph Bolt 3713 Blackburn Ave Ashland, KY 41101 Date(s) debt was incurred _____ Last 4 digits of account number <u>6785</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 911 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.60	Nonpriority creditor's name and mailing address Tracy Boone 1222 James St Macon, GA 31204 Date(s) debt was incurred ____ Last 4 digits of account number <u>6786</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1BD; Unit: 1117 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.61	Nonpriority creditor's name and mailing address Waltraud Booth 234 Winters Dr Wintersville, OH 43953 Date(s) debt was incurred ____ Last 4 digits of account number <u>6788</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 917 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.62	Nonpriority creditor's name and mailing address Timothy Borchardt 2395 State Highway 12 Greene, NY 13778 Date(s) debt was incurred ____ Last 4 digits of account number <u>6789</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 920 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.63	Nonpriority creditor's name and mailing address Chester Boroski, Sr. 28865 Morgan Ln Richfield, NC 28137 Date(s) debt was incurred ____ Last 4 digits of account number <u>6790</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 911 (Annual Float) Unit Type: 1BD; Unit: 916 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.64	Nonpriority creditor's name and mailing address Richard Bowling 117B Valley Dr Nitro, WV 25303 Date(s) debt was incurred ____ Last 4 digits of account number <u>6791</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 907 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.65	Nonpriority creditor's name and mailing address Andy Boyette 891 Scott Rd Kenly, NC 27542 Date(s) debt was incurred ____ Last 4 digits of account number <u>6792</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit 1117 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.66	Nonpriority creditor's name and mailing address Lisa Boykin 1952 Lucknow Rd Camden, SC 29020 Date(s) debt was incurred _____ Last 4 digits of account number <u>6793</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 904 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.67	Nonpriority creditor's name and mailing address Jeri Brannen 9464 US 52 Manchester, OH 45144 Date(s) debt was incurred _____ Last 4 digits of account number <u>6794</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 903 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.68	Nonpriority creditor's name and mailing address Anthony Breeden 4922 Big Creek Rd Hartford, TN 37753 Date(s) debt was incurred _____ Last 4 digits of account number <u>6797</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 921 (Annual Float)</u> Unit Type: <u>1 BD; Unit 921 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.69	Nonpriority creditor's name and mailing address Shawn Brehm 405 East Market Street Baltimore, OH 43105 Date(s) debt was incurred _____ Last 4 digits of account number <u>6798</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 917 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.70	Nonpriority creditor's name and mailing address William Brisson 10405 Rockinham Rd Laurel Hill, NC 28351 Date(s) debt was incurred _____ Last 4 digits of account number <u>6799</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1BD; Unit: 1118 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.71	Nonpriority creditor's name and mailing address Robert Bronson 1364 Doc Brown Rd Raeford, NC 28376 Date(s) debt was incurred _____ Last 4 digits of account number <u>6801</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 906 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.72	Nonpriority creditor's name and mailing address H. Brooks 205 W Alton St Durham, NC 27707 Date(s) debt was incurred _____ Last 4 digits of account number <u>6802</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 903 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.73	Nonpriority creditor's name and mailing address Karen Brooks 1790 Avenue S NW Winter Haven, FL 33881 Date(s) debt was incurred _____ Last 4 digits of account number <u>6803</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 921 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.74	Nonpriority creditor's name and mailing address Edward Brown 508 Katonah Ave Charlotte, NC 28208 Date(s) debt was incurred _____ Last 4 digits of account number <u>6805</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 901 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.75	Nonpriority creditor's name and mailing address Kenwick Brown 1804 Winthrop Dr Florence, SC 29501 Date(s) debt was incurred _____ Last 4 digits of account number <u>6806</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 1101 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.76	Nonpriority creditor's name and mailing address Timothy Brown 1433 Hillsboro Rd Orangeburg, SC 29115 Date(s) debt was incurred _____ Last 4 digits of account number <u>6808</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 902 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.77	Nonpriority creditor's name and mailing address Hugh Brunner 501 N High St Duncannon, PA 17020 Date(s) debt was incurred _____ Last 4 digits of account number <u>6809</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 915 (Annual Float)</u> Unit Type: <u>STU; Unit: 914 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.78	Nonpriority creditor's name and mailing address Rodney Brunson 140 Trailwood Drive Sumter, SC 29154 Date(s) debt was incurred _____ Last 4 digits of account number <u>6811</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 1117 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.79	Nonpriority creditor's name and mailing address Danny Bryant 103 Wilhowie Dr, #A Lexington, SC 29073 Date(s) debt was incurred _____ Last 4 digits of account number <u>6812</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 908 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.80	Nonpriority creditor's name and mailing address Ronnie Bryant 2331 Grantham School Rd Mount Olive, NC 28365 Date(s) debt was incurred _____ Last 4 digits of account number <u>6813</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 1101 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.81	Nonpriority creditor's name and mailing address Rosendo Bryden 4576 Vernon Farms Blvd Kernersville, NC 27284 Date(s) debt was incurred _____ Last 4 digits of account number <u>6814</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit 921 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.82	Nonpriority creditor's name and mailing address Nicole Bubb 247 Harper Dr Snow Hill, NC 28580 Date(s) debt was incurred _____ Last 4 digits of account number <u>6815</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 901 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.83	Nonpriority creditor's name and mailing address Brian M. Buch 4711 Poplar Lane Doral, FL 33178 Date(s) debt was incurred _____ Last 4 digits of account number <u>6816</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit 905 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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		Name			
3.84	Nonpriority creditor's name and mailing address Edward J. Bucia 701 Bent Hickory Road Charleston, SC 29414 Date(s) debt was incurred _____ Last 4 digits of account number <u>6817</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: 1 BD; Unit 915 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>		
3.85	Nonpriority creditor's name and mailing address Burchfield Vacation Rentals, LLC c/o James Franklin Burchfield PO Box 18322 Knoxville, TN 37928 Date(s) debt was incurred _____ Last 4 digits of account number <u>6818</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: 1 BD; Unit 917 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>		
3.86	Nonpriority creditor's name and mailing address Jeffrey Burdick 4046 Old Trail Rd Martinez, GA 30907 Date(s) debt was incurred _____ Last 4 digits of account number <u>6819</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: STU; Unit: 910 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>		
3.87	Nonpriority creditor's name and mailing address George P. Burfeind 172 Bunker Rd Rotonda West, FL 33947 Date(s) debt was incurred _____ Last 4 digits of account number <u>6820</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: 1 BD; Unit: 918 (Annual Points)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>		
3.88	Nonpriority creditor's name and mailing address Nannie Burton 1020 Grand Concourse Bronx, NY 10451 Date(s) debt was incurred _____ Last 4 digits of account number <u>6821</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: STU; Unit: 907 (Annual Float)</u> <u>Unit Type: 1 BD; Unit: 919 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>		
3.89	Nonpriority creditor's name and mailing address James Byker 134 W Central Ave Zeeland, MI 49464 Date(s) debt was incurred _____ Last 4 digits of account number <u>6823</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: STU; Unit 1105 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>		

Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known) _____
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3.90	Nonpriority creditor's name and mailing address Audrey B. Cahill 4 George St Sharon, ON LOG 1VO Date(s) debt was incurred _____ Last 4 digits of account number <u>6825</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU</u> ; Unit: <u>1114 (Biennial Points)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.91	Nonpriority creditor's name and mailing address William Callahan 131 Kenneth Cooper Road Whittier, NC 28789 Date(s) debt was incurred _____ Last 4 digits of account number <u>6826</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU</u> ; Unit: <u>914 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.92	Nonpriority creditor's name and mailing address Yolanda Leon Camacho 7200 Amster Rd N. Chesterfield, VA 23225 Date(s) debt was incurred _____ Last 4 digits of account number <u>6827</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU</u> ; Unit <u>914 (Annual Float)</u> Unit Type: <u>1 BD</u> ; Unit <u>915 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.93	Nonpriority creditor's name and mailing address Jimmy Camp 19 Oak Grove Rd Landrum, SC 29356 Date(s) debt was incurred _____ Last 4 digits of account number <u>6828</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1BD</u> ; Unit: <u>1118 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.94	Nonpriority creditor's name and mailing address Albert L. Campbell 5128 Dorchester Rd North Charleston, SC 29403 Date(s) debt was incurred _____ Last 4 digits of account number <u>6829</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU</u> ; Unit <u>903 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.95	Nonpriority creditor's name and mailing address Robert Campbell, Jr. 164 Windsor Way Mount Royal, NJ 08061 Date(s) debt was incurred _____ Last 4 digits of account number <u>6832</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD</u> ; Unit: <u>1116 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.96	Nonpriority creditor's name and mailing address Katie Campbell 32 Railroad Ave PO Box 586 Craigsville, VA 24430 Date(s) debt was incurred _____ Last 4 digits of account number <u>6831</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit 916 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.97	Nonpriority creditor's name and mailing address Patricia Canton 7749 Red Maple Pl Westerville, OH 43082 Date(s) debt was incurred _____ Last 4 digits of account number <u>6834</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit 915 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.98	Nonpriority creditor's name and mailing address Patricia Carey 6070 Highway 145 Carnesville, GA 30521 Date(s) debt was incurred _____ Last 4 digits of account number <u>6836</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit 1101 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.99	Nonpriority creditor's name and mailing address Benjamin Carroll 1160 N 17th E Mountain Home, ID 83647 Date(s) debt was incurred _____ Last 4 digits of account number <u>6837</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 920 (Annual Float) Unit Type: 1 BD; Unit: 921 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.100	Nonpriority creditor's name and mailing address Robert Carroll 1203 Cherokee Trail Covington, VA 24426 Date(s) debt was incurred _____ Last 4 digits of account number <u>6838</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1BD; Unit: 918 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.101	Nonpriority creditor's name and mailing address Thomas G. Carslay 13507 East 43rd Dr. Yuma, AZ 85367 Date(s) debt was incurred _____ Last 4 digits of account number <u>6839</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit 902 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known)
Name		
3.102	Nonpriority creditor's name and mailing address Jerry Carter 1050 River Rd Stoneville, NC 27048 Date(s) debt was incurred _____ Last 4 digits of account number <u>6840</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 1114 (Annual Float) Unit Type: 1 BD; Unit: 1115 (Annual Float) Unit Type: 1 BD; Unit: 920 (Annual Float) Unit Type: STU; Unit: 909 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.103	Nonpriority creditor's name and mailing address Ronald Carter 1531 Blain Hwy Waverly, OH 45690 Date(s) debt was incurred _____ Last 4 digits of account number <u>6841</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 919 (Annual Float) Unit Type: STU; Unit: 910 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.104	Nonpriority creditor's name and mailing address Amy Case 804 Driftwood Lane North, SC 29112 Date(s) debt was incurred _____ Last 4 digits of account number <u>6843</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 918 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.105	Nonpriority creditor's name and mailing address Gary Casterline, Jr. 259 N Vine Ave Rialto, CA 92376 Date(s) debt was incurred _____ Last 4 digits of account number <u>6844</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 912 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.106	Nonpriority creditor's name and mailing address Ralph Castro 7001 Cannon Dr Canal Winchester, OH 43110 Date(s) debt was incurred _____ Last 4 digits of account number <u>6845</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 1116 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.107	Nonpriority creditor's name and mailing address Brad Caudill 1500 Cedar Ln Wilkesboro, NC 28697 Date(s) debt was incurred ____ Last 4 digits of account number <u>6846</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 918 (Annual Float) Unit Type: STU; Unit: 906 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.108	Nonpriority creditor's name and mailing address Clyde Caudle 301 Woodberry Dr Wingate, NC 28174 Date(s) debt was incurred ____ Last 4 digits of account number <u>6847</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 917 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.109	Nonpriority creditor's name and mailing address Kiwanna Chapman 1200 E Holly St Rocky Mount, SC 29461 Date(s) debt was incurred ____ Last 4 digits of account number <u>6849</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit 906 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.110	Nonpriority creditor's name and mailing address Thomas Chapman 116 Crest Ave East Haven, CT 06513 Date(s) debt was incurred ____ Last 4 digits of account number <u>6850</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 921 (Biannual Float) Unit Type: 1 BD; Unit: 920 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.111	Nonpriority creditor's name and mailing address Raoul Chasse 130 Lopes Cir Franklin, NC 28734 Date(s) debt was incurred ____ Last 4 digits of account number <u>6851</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 916 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.112	Nonpriority creditor's name and mailing address Edward Chavis PO Box 462 Pembroke, NC 28372 Date(s) debt was incurred _____ Last 4 digits of account number <u>6852</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 1104 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.113	Nonpriority creditor's name and mailing address Cherokee Motels, Inc. PO Box 1362 Myrtle Beach, SC 29578 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$360,000.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Note Payment Due</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.114	Nonpriority creditor's name and mailing address Vernell Cherry 2402 Huntwood Ct. Frederick, MD 21702 Date(s) debt was incurred _____ Last 4 digits of account number <u>6853</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 915 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.115	Nonpriority creditor's name and mailing address Wieslaw Cierpka 42 Nantucket Dr Richmond Hill, ON, L4E 3V8, Canada Date(s) debt was incurred _____ Last 4 digits of account number <u>6855</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1BD; Unit: 919 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.116	Nonpriority creditor's name and mailing address John Cindea 6314 Ewe Dr Clinton, OH 44216 Date(s) debt was incurred _____ Last 4 digits of account number <u>6856</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 901 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.117	Nonpriority creditor's name and mailing address Barbara Clark 290 Clubfoot Creek Rd Havelock, NC 28532 Date(s) debt was incurred _____ Last 4 digits of account number <u>6857</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 907 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.118	Nonpriority creditor's name and mailing address Donna Clark 7204 Cloverfield Ct Wilmington, NC 28411 Date(s) debt was incurred _____ Last 4 digits of account number <u>6858</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 1114 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.119	Nonpriority creditor's name and mailing address Joyce Clark 3830 Pineleaf Cir Midland, NC 28107 Date(s) debt was incurred _____ Last 4 digits of account number <u>6859</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 917 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.120	Nonpriority creditor's name and mailing address Leonard Clark 1008 Double Bridges Drive Fancy Gap, VA 24328 Date(s) debt was incurred _____ Last 4 digits of account number <u>6860</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1BD; Unit 1116 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.121	Nonpriority creditor's name and mailing address Winston Clarke PSC 557 Box 386 FPO, AP 96379-0004 Date(s) debt was incurred _____ Last 4 digits of account number <u>6861</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 910 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.122	Nonpriority creditor's name and mailing address William Clay 4201 Broad Run Church Rd New Baltimore, VA 20187 Date(s) debt was incurred _____ Last 4 digits of account number <u>6863</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 1101 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.123	Nonpriority creditor's name and mailing address Nelson Clayton 167 Flossie Ln Lexington, NC 27295 Date(s) debt was incurred _____ Last 4 digits of account number <u>6864</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 904 (Biennial Points)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.124	Nonpriority creditor's name and mailing address James Clontz 3003 Camden Road Marshville, NC 28103 Date(s) debt was incurred _____ Last 4 digits of account number <u>6866</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>S1BD; Unit: 917 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.125	Nonpriority creditor's name and mailing address Club Resorts 1093 State Highway 176 Walnut Shade, MO 65771 Date(s) debt was incurred _____ Last 4 digits of account number <u>1224</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 908 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.126	Nonpriority creditor's name and mailing address Michael Coats 100 Navigator Ln Laurens, SC 29360 Date(s) debt was incurred _____ Last 4 digits of account number <u>6867</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 1114 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.127	Nonpriority creditor's name and mailing address Adelbert Cobbin 244 Lincoln St Ravenna, OH 44266 Date(s) debt was incurred _____ Last 4 digits of account number <u>6868</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 902 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.128	Nonpriority creditor's name and mailing address Robert Coffey 9602 Norwick Ln Fredericksburg, VA 22408 Date(s) debt was incurred _____ Last 4 digits of account number <u>6869</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 901 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.129	Nonpriority creditor's name and mailing address Dara Cohen 3621 Kelly Way Louisville, KY 40220 Date(s) debt was incurred _____ Last 4 digits of account number <u>6870</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 902 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Sand Castle South Timeshare Owners Association, Inc. Name _____	Case number (if known) _____
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3.130	Nonpriority creditor's name and mailing address Timothy Colby 7613 Whirlaway Dr Midlothian, VA 23112 Date(s) debt was incurred _____ Last 4 digits of account number <u>0169</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: STU; Unit 909 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.131	Nonpriority creditor's name and mailing address Shawn Cole 2 Harvard Drive Greenville, SC 29605 Date(s) debt was incurred _____ Last 4 digits of account number <u>6872</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: STU; Unit: 908 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.132	Nonpriority creditor's name and mailing address David Collins, Jr. 129 Quincy Dr Landrum, SC 29356 Date(s) debt was incurred _____ Last 4 digits of account number <u>6874</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: 1BD; Unit: 1116 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.133	Nonpriority creditor's name and mailing address Charles Compton, Jr. 6501 Wilton Rd Chesterfield, VA 23832 Date(s) debt was incurred _____ Last 4 digits of account number <u>6876</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: 1 BD; Unit 1115 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.134	Nonpriority creditor's name and mailing address Joshua Conerly 1600 Manchester Dr SW Conyers, GA 30094 Date(s) debt was incurred _____ Last 4 digits of account number <u>6877</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: STU; Unit: 904 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.135	Nonpriority creditor's name and mailing address Kenneth Conley 612 China Grove Hwy Rockwell, NC 28138 Date(s) debt was incurred _____ Last 4 digits of account number <u>6878</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: 1 BD; Unit: 918 (Biannual Float)</u> <u>Unit Type: 1 BD; Unit: 917 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known)
Name		
3.136	Nonpriority creditor's name and mailing address Joann Cook PO Box 422 Kershaw, SC 29067 Date(s) debt was incurred _____ Last 4 digits of account number <u>6880</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 1103 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.137	Nonpriority creditor's name and mailing address Samantha Cooley 1055 Old Plantation Rd Walnut Cove, NC 27052 Date(s) debt was incurred _____ Last 4 digits of account number <u>0485</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 906 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.138	Nonpriority creditor's name and mailing address Estate of Sandra Coombes c/o Carl Ryan 282 Roach Ave Welland, Ontario L3C2W4 Date(s) debt was incurred _____ Last 4 digits of account number <u>6881</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 904 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.139	Nonpriority creditor's name and mailing address Alvin Cooper 426 Glacier Place Winterville, NC 28590 Date(s) debt was incurred _____ Last 4 digits of account number <u>6882</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1-BD; Unit: 916 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.140	Nonpriority creditor's name and mailing address Frances Cooper 3407 Blanch Rd Blanch, NC 27212 Date(s) debt was incurred _____ Last 4 digits of account number <u>6883</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 1101 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.141	Nonpriority creditor's name and mailing address Sandra Cooper 552 Home Ave NW Concord, NC 28025 Date(s) debt was incurred _____ Last 4 digits of account number <u>6884</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 904 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.142	Nonpriority creditor's name and mailing address James Corbin 1480 WO Ezell Blvd., Apt L95 Spartanburg, SC 29301 Date(s) debt was incurred _____ Last 4 digits of account number <u>6885</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 907 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.143	Nonpriority creditor's name and mailing address John Cortina 2 Bajala Dr E Beaufort, SC 29907 Date(s) debt was incurred _____ Last 4 digits of account number <u>6886</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 1103 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.144	Nonpriority creditor's name and mailing address David Cox 12166 Rain Hollow Ct Maryland Heights, MO 63043 Date(s) debt was incurred _____ Last 4 digits of account number <u>6888</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 905 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.145	Nonpriority creditor's name and mailing address Stephen Coyle 12003 Prairie Meadow Dr Orlando, FL 32837 Date(s) debt was incurred _____ Last 4 digits of account number <u>0486</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 906 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.146	Nonpriority creditor's name and mailing address Robert Craig, Jr. 7012 Idlewood Rd Charlotte, NC 28212 Date(s) debt was incurred _____ Last 4 digits of account number <u>6891</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 903 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.147	Nonpriority creditor's name and mailing address Robert Craig 7303 Rourke Cv Memphis, TN 38125 Date(s) debt was incurred _____ Last 4 digits of account number <u>6890</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 916 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.148	Nonpriority creditor's name and mailing address Scott Crane 1620 Wagon Wheel Dr Blackfoot, ID 83221 Date(s) debt was incurred _____ Last 4 digits of account number <u>6892</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 1110 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.149	Nonpriority creditor's name and mailing address Johnny Crawford 9203 Wilkinson Blvd. Charlotte, NC 28214 Date(s) debt was incurred _____ Last 4 digits of account number <u>6893</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 901 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.150	Nonpriority creditor's name and mailing address Ronnie Crimes, Sr. PO Box 208 Preston, GA 31824 Date(s) debt was incurred _____ Last 4 digits of account number <u>6894</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 916 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.151	Nonpriority creditor's name and mailing address Judith Cripe 3104 N Broadway St APT A3 Knoxville, TN 37917 Date(s) debt was incurred _____ Last 4 digits of account number <u>6895</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 1103 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.152	Nonpriority creditor's name and mailing address CRM of the Carolinas, LLC 3660 Old Kings Hwy Murrells Inlet, SC 29576 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$28,018.98 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Maintenance Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.153	Nonpriority creditor's name and mailing address Christopher Crousser 15913 State Route 550 Fleming, OH 45729 Date(s) debt was incurred _____ Last 4 digits of account number <u>6896</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 916 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.154	Nonpriority creditor's name and mailing address Tomesha Crowder 2704 Walkup Ave Monroe, NC 28110 Date(s) debt was incurred _____ Last 4 digits of account number <u>6898</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 903 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.155	Nonpriority creditor's name and mailing address Robert Crum 5785 Tyro St NE Canton, OH 44721 Date(s) debt was incurred _____ Last 4 digits of account number <u>6899</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 902 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.156	Nonpriority creditor's name and mailing address Jennifer Dagenhart 7821 Pebbleridge Dr Charlotte, NC 28212 Date(s) debt was incurred _____ Last 4 digits of account number <u>7470</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1BD; Unit: 921 (Annual Float)</u> Unit Type: <u>1BD; Unit: 920 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.157	Nonpriority creditor's name and mailing address Grover Damron 1932 Pineview Rd Randleman, NC 27317 Date(s) debt was incurred _____ Last 4 digits of account number <u>6902</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 1101 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.158	Nonpriority creditor's name and mailing address James Danford, Jr. 3931 Spring Garden Ln Estero, FL 33928 Date(s) debt was incurred _____ Last 4 digits of account number <u>6903</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 902 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.159	Nonpriority creditor's name and mailing address Karen Daniel 308 Fuller Dr #21 Easley, SC 29640 Date(s) debt was incurred _____ Last 4 digits of account number <u>6904</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 902 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.160	Nonpriority creditor's name and mailing address Christopher Daniels 10 Glen Oak Rd Fredericksburg, VA 22405 Date(s) debt was incurred _____ Last 4 digits of account number <u>6905</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 915 (Annual Float) Unit Type: STU; Unit: 914 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.161	Nonpriority creditor's name and mailing address Floyd Daniels 1401 S. Slocumb Street Goldsboro, NC 27530 Date(s) debt was incurred _____ Last 4 digits of account number <u>6906</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1BD; Unit 1116 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.162	Nonpriority creditor's name and mailing address Djani Darmanovic 9406 Deer Spring Lane Charlotte, NC 28210 Date(s) debt was incurred _____ Last 4 digits of account number <u>6907</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 917 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.163	Nonpriority creditor's name and mailing address Patrick Daugherty 431 Fairway Dr Abingdon, VA 24266 Date(s) debt was incurred _____ Last 4 digits of account number <u>6908</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 910 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.164	Nonpriority creditor's name and mailing address John Davenport 228 Aurora Blvd Matthews, NC 28105 Date(s) debt was incurred _____ Last 4 digits of account number <u>6909</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit 1101 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.165	Nonpriority creditor's name and mailing address Almond Davis 292 Trevor Drive Walterboro, SC 29488 Date(s) debt was incurred _____ Last 4 digits of account number <u>6910</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit 911 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.166	Nonpriority creditor's name and mailing address George Davis 311 Wythe Rd Egg Harbor Township, NJ 08234 Date(s) debt was incurred _____ Last 4 digits of account number <u>6913</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 1105 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.167	Nonpriority creditor's name and mailing address Graham Davis, Jr. 1129 Hazelwood Rd Columbia, SC 29209 Date(s) debt was incurred _____ Last 4 digits of account number <u>6914</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 906 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.168	Nonpriority creditor's name and mailing address Rudolph Davis 3207 Southgreen Rd Windsor Mill, MD 21244 Date(s) debt was incurred _____ Last 4 digits of account number <u>6917</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 920 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.169	Nonpriority creditor's name and mailing address Norman Deal 3040 Salem Road Parrottsville, TN 37843-2207 Date(s) debt was incurred _____ Last 4 digits of account number <u>6920</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1BD; Unit 917 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.170	Nonpriority creditor's name and mailing address Dorcas Delgado 7348 Van Grayson Loop Fayetteville, NC 28314 Date(s) debt was incurred _____ Last 4 digits of account number <u>6922</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 910 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.171	Nonpriority creditor's name and mailing address Belinda Deline 113 Parsons Mill Lane Columbia, SC 29229 Date(s) debt was incurred _____ Last 4 digits of account number <u>6923</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 907 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.172	Nonpriority creditor's name and mailing address Matthew Dell'Orso 1907 Belleville Drive, NE Leesburg, VA 20176 Date(s) debt was incurred _____ Last 4 digits of account number <u>6924</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 918 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.173	Nonpriority creditor's name and mailing address Rex Delph 6514 Tazewell Pike Knoxville, TN 37918 Date(s) debt was incurred _____ Last 4 digits of account number <u>6925</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit 909 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.174	Nonpriority creditor's name and mailing address Robert Demarest, Jr. 8028 Long Drive Dr. Port Saint Lucie, FL 34952 Date(s) debt was incurred _____ Last 4 digits of account number <u>6926</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit 901 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.175	Nonpriority creditor's name and mailing address Etta DeRizzio 335 S 10th Avenue Mount Vernon, NY 10550 Date(s) debt was incurred _____ Last 4 digits of account number <u>6927</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1BD; Unit 921 (Annual Float) Unit Type: 1BD; Unit 920 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.176	Nonpriority creditor's name and mailing address Norris Detter 4761 Sand Clay Rd Hickory, NC 28602 Date(s) debt was incurred _____ Last 4 digits of account number <u>6928</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit 921 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.177	Nonpriority creditor's name and mailing address Jana Dew 127 Woodland Dr Chester, SC 29706 Date(s) debt was incurred _____ Last 4 digits of account number <u>6929</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 904 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Sand Castle South Timeshare Owners Association, Inc. Name _____	Case number (if known) _____
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3.178	Nonpriority creditor's name and mailing address Willie Dexter 2823 Ridgeview Dr Augusta, GA 30909 Date(s) debt was incurred _____ Last 4 digits of account number <u>6930</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: NOTICE PURPOSES ONLY Unit Type: STU; Unit: 902 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.179	Nonpriority creditor's name and mailing address Victor Diaz, III 7534 Dr. Hector P Garcia Dr Corpus Christi, TX 78414 Date(s) debt was incurred _____ Last 4 digits of account number <u>6931</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: NOTICE PURPOSES ONLY Unit Type: STU; Unit: 1114 (Biennial Points) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.180	Nonpriority creditor's name and mailing address Barbie Dillard 153 Arrow Point Rd Jackson, GA 30233 Date(s) debt was incurred _____ Last 4 digits of account number <u>6932</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: NOTICE PURPOSES ONLY Unit Type: STU; Unit: 911 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.181	Nonpriority creditor's name and mailing address Melvin Dixon 165 Boyd St Winterville, NC 28590 Date(s) debt was incurred _____ Last 4 digits of account number <u>6933</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: NOTICE PURPOSES ONLY Unit Type: STU; Unit 902 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.182	Nonpriority creditor's name and mailing address Ronald Dobbins PO Box 1071 Pocono Pines, PA 18350 Date(s) debt was incurred _____ Last 4 digits of account number <u>6934</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: NOTICE PURPOSES ONLY Unit Type: STU; Unit 903 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.183	Nonpriority creditor's name and mailing address Sokpheak Doeung 4608 Bolen Huse Road Memphis, TN 38128 Date(s) debt was incurred _____ Last 4 digits of account number <u>6935</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: NOTICE PURPOSES ONLY Unit Type: 1BD; Unit: 916 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Name _____		
3.184	Nonpriority creditor's name and mailing address Dennis Donnelly 633 Garfield St Heidelberg, PA 15106 Date(s) debt was incurred _____ Last 4 digits of account number <u>6937</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 921 (Annual Float) Unit Type: 1 BD; Unit: 921 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.185	Nonpriority creditor's name and mailing address Jocelyn Doyon 901 Des Merises Levis, QC Date(s) debt was incurred _____ Last 4 digits of account number <u>6940</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 916 (Annual Points) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.186	Nonpriority creditor's name and mailing address Gloria Draughon 1105 Athens Dr Raleigh, NC 27606 Date(s) debt was incurred _____ Last 4 digits of account number <u>6941</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 903 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.187	Nonpriority creditor's name and mailing address Donna Drennen 104 Poplin Place Clover, SC 29710 Date(s) debt was incurred _____ Last 4 digits of account number <u>6942</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 1103 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.188	Nonpriority creditor's name and mailing address George Dry, IV 20829 Ridgecrest Rd Locust, NC 28097 Date(s) debt was incurred _____ Last 4 digits of account number <u>6944</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 901 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.189	Nonpriority creditor's name and mailing address Kristin Duncan c/o US Consumer Attorneys-Henry Portner 1300 N Johnson Ave, Ste 107 El Cajon, CA 92020 Date(s) debt was incurred _____ Last 4 digits of account number <u>6946</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 1120 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.190	Nonpriority creditor's name and mailing address Russell Duncan 294 Greenlee Rd Marion, NC 28752 Date(s) debt was incurred _____ Last 4 digits of account number <u>6947</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 921 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.191	Nonpriority creditor's name and mailing address Steven Durham 1123 Blue Stem Dr Unit 30A Pawleys Island, SC 29585 Date(s) debt was incurred _____ Last 4 digits of account number <u>6949</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 912 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.192	Nonpriority creditor's name and mailing address Harriet Durrwachter 16839 Petmar Cir Hagerstown, MD 21742 Date(s) debt was incurred _____ Last 4 digits of account number <u>6950</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 917 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.193	Nonpriority creditor's name and mailing address Terry Durst 4190 E Palm Cyn Drive Palm Springs, CA 92264 Date(s) debt was incurred _____ Last 4 digits of account number <u>0577</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 915 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.194	Nonpriority creditor's name and mailing address E. Dusin 3 Corey Pl Manhattan, KS 66502 Date(s) debt was incurred _____ Last 4 digits of account number <u>6951</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 919 (Annual Float)</u> Unit Type: <u>1 BD; Unit 918 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.195	Nonpriority creditor's name and mailing address Laura Dyal 1060 Saluda River Rd Silverstreet, SC 29145 Date(s) debt was incurred _____ Last 4 digits of account number <u>6952</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 906 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.196	Nonpriority creditor's name and mailing address Ann Dyjak 77 Steven Pl Smithtown, NY 11787 Date(s) debt was incurred _____ Last 4 digits of account number <u>6953</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 918 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.197	Nonpriority creditor's name and mailing address Gregory Dykes 6310 High Dr Knoxville, TN 37921 Date(s) debt was incurred _____ Last 4 digits of account number <u>6954</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 1114 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.198	Nonpriority creditor's name and mailing address Herman Eagle 213W W 21st Street Kannapolis, NC 28081 Date(s) debt was incurred _____ Last 4 digits of account number <u>6955</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 909 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.199	Nonpriority creditor's name and mailing address John Earnshaw 255 Taipei Island Ln Leesburg, FL 34788 Date(s) debt was incurred _____ Last 4 digits of account number <u>7662</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 908 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.200	Nonpriority creditor's name and mailing address Kimberly Eaton c/o Mitchell Reed Sussman 1053 S. Palm Canyon Dr Palm Springs, CA 92264 Date(s) debt was incurred _____ Last 4 digits of account number <u>6956</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 918 (Annual Float) Unit Type: 1 BD; Unit: 919 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.201	Nonpriority creditor's name and mailing address Crystal Eddy PO Box 8264 Springfield, MO 65801 Date(s) debt was incurred ____ Last 4 digits of account number <u>5014</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 906 (Biannual Float)</u> Unit Type: <u>STU; Unit 909 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.202	Nonpriority creditor's name and mailing address Ojoma Edeh Herr 6 Leaman Rd Lancaster, PA 17603 Date(s) debt was incurred ____ Last 4 digits of account number <u>7100</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 1114 (Annual Float)</u> Unit Type: <u>1 BD; Unit: 1115 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.203	Nonpriority creditor's name and mailing address Michael Edmunds 1915 Parlow Drive Richmond, VA 23222 Date(s) debt was incurred ____ Last 4 digits of account number <u>6958</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 1106 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.204	Nonpriority creditor's name and mailing address Christopher Edwards PO Box 207 CMR 411, Box 5891 APO, AE 09112 Date(s) debt was incurred ____ Last 4 digits of account number <u>6959</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 1114 (Annual Float)</u> Unit Type: <u>1 BD; Unit: 1115 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.205	Nonpriority creditor's name and mailing address Richard Edwards 138 Bransetter Rd Cave City, KY 42127 Date(s) debt was incurred ____ Last 4 digits of account number <u>6960</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 903 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

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3.206	Nonpriority creditor's name and mailing address Sheila Edwards 1695 Silver Meadow Cir Colorado Springs, CO 80951 Date(s) debt was incurred _____ Last 4 digits of account number <u>6961</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 911 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.207	Nonpriority creditor's name and mailing address Suzanne Ellers 56 Crawford Manor Dr Toccoa, GA 30577 Date(s) debt was incurred _____ Last 4 digits of account number <u>6963</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 916 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.208	Nonpriority creditor's name and mailing address Roy Ellison 80 Vermont Ave Newark, NJ 07106 Date(s) debt was incurred _____ Last 4 digits of account number <u>6964</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 905 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.209	Nonpriority creditor's name and mailing address Kenneth Elmore 2615 Trufield Dr Sumter, SC 29153 Date(s) debt was incurred _____ Last 4 digits of account number <u>6965</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 918 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.210	Nonpriority creditor's name and mailing address Daniel Elyard 11788 Melrose Ave Greencastle, PA 17225 Date(s) debt was incurred _____ Last 4 digits of account number <u>6966</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 901 (Annual Points)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.211	Nonpriority creditor's name and mailing address Ryan England 801 Avenue F El Campo, TX 77437 Date(s) debt was incurred _____ Last 4 digits of account number <u>6967</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 902 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.212	Nonpriority creditor's name and mailing address Charles Evans 20 Gerru Ct Taylors, SC 29687 Date(s) debt was incurred _____ Last 4 digits of account number <u>6973</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 904 (Biennial Points) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.213	Nonpriority creditor's name and mailing address Nikkie Evans 1640 Dinwiddie Ct Petersburg, VA 23803 Date(s) debt was incurred _____ Last 4 digits of account number <u>6975</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 901 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.214	Nonpriority creditor's name and mailing address Rich Evans PO Box 95 Grayson, KY 41143 Date(s) debt was incurred _____ Last 4 digits of account number <u>6976</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 1103 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.215	Nonpriority creditor's name and mailing address Erica Everette 124 Polly Cir Angier, NC 27501 Date(s) debt was incurred _____ Last 4 digits of account number <u>6977</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 921 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.216	Nonpriority creditor's name and mailing address Michael Evola 3101 Blackburn Dr Waxhaw, NC 28173 Date(s) debt was incurred _____ Last 4 digits of account number <u>6978</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 915 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.217	Nonpriority creditor's name and mailing address Clair Fairbrother 10650 Davis Hollow Rd Cohocton, NY 14826 Date(s) debt was incurred _____ Last 4 digits of account number <u>6980</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1BD; Unit: 918 (Biannual Float) Unit Type: STU; Unit: 909 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.218	Nonpriority creditor's name and mailing address Angel Fairley 622 Saratoga Drive Alpharetta, GA 30096 Date(s) debt was incurred _____ Last 4 digits of account number <u>6981</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 911 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.219	Nonpriority creditor's name and mailing address Sanders Fairley 333 W Rockingham Rd Maxton, NC 28364 Date(s) debt was incurred _____ Last 4 digits of account number <u>6982</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 903 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.220	Nonpriority creditor's name and mailing address Frank Faith 6072 E 1550 N Elnora, IN 47529 Date(s) debt was incurred _____ Last 4 digits of account number <u>6983</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 907 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.221	Nonpriority creditor's name and mailing address James Farris 5794 Highway 9 Nichols, SC 29581 Date(s) debt was incurred _____ Last 4 digits of account number <u>6984</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 918 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.222	Nonpriority creditor's name and mailing address Nehemiah Fedd 1919 W Highland Ave Albany, GA 31707 Date(s) debt was incurred _____ Last 4 digits of account number <u>6985</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit 1118 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.223	Nonpriority creditor's name and mailing address Yushanda Felder 917 Presidential Drive Orangeburg, SC 29115 Date(s) debt was incurred _____ Last 4 digits of account number <u>6986</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1-BD; Unit: 917 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.224	Nonpriority creditor's name and mailing address Delphine Ferguson 111 N 3rd Avenue Apt 4P Mount Vernon, NY 10550 Date(s) debt was incurred ____ Last 4 digits of account number <u>6988</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 910 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.225	Nonpriority creditor's name and mailing address Daniel Fett 714 Lovechio Dr Mishawaka, IN 46544 Date(s) debt was incurred ____ Last 4 digits of account number <u>6989</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit 1114 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.226	Nonpriority creditor's name and mailing address Jason Fields 11336 McCauliff Ct Richmond, VA 23236 Date(s) debt was incurred ____ Last 4 digits of account number <u>7567</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 907 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.227	Nonpriority creditor's name and mailing address Lisa Fields PO Box 24 Norton, VA 24273 Date(s) debt was incurred ____ Last 4 digits of account number <u>6990</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 905 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.228	Nonpriority creditor's name and mailing address Billy Fife, Jr. 109 Hollingsworth Dr Grovetown, GA 30813 Date(s) debt was incurred ____ Last 4 digits of account number <u>6991</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit 909 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.229	Nonpriority creditor's name and mailing address Paul Finch 181 Paoli Rd Carlton, GA 30627 Date(s) debt was incurred ____ Last 4 digits of account number <u>6993</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 908 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.230	Nonpriority creditor's name and mailing address Randy Findley 5841 Redhawk Dr New Port Richey, FL 34655 Date(s) debt was incurred _____ Last 4 digits of account number <u>6994</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 902 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.231	Nonpriority creditor's name and mailing address Erica Fisher 308 Wrayhill Dr Charlotte, NC 28262 Date(s) debt was incurred _____ Last 4 digits of account number <u>7383</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 1103 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.232	Nonpriority creditor's name and mailing address Calvin Fleming PO Box 1039 Matthews, NC 28104 Date(s) debt was incurred _____ Last 4 digits of account number <u>6995</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 908 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.233	Nonpriority creditor's name and mailing address Raymond Fletcher 407 Fletcher Rd Boiling Springs, SC 29316 Date(s) debt was incurred _____ Last 4 digits of account number <u>6996</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 1103 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.234	Nonpriority creditor's name and mailing address Joe Flowers 5420 Danby Ave Oxon Hill, MD 20745 Date(s) debt was incurred _____ Last 4 digits of account number <u>6997</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 918 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.235	Nonpriority creditor's name and mailing address David Foltz PO Box 513 Stanley, VA 22851 Date(s) debt was incurred _____ Last 4 digits of account number <u>6998</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 906 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.236	Nonpriority creditor's name and mailing address Joshua Ford 234 Weslo Dr Kernersville, NC 27284 Date(s) debt was incurred _____ Last 4 digits of account number <u>6999</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 1103 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.237	Nonpriority creditor's name and mailing address Monte Forte PO Box 574 Roseboro, NC 28382 Date(s) debt was incurred _____ Last 4 digits of account number <u>7000</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 905 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.238	Nonpriority creditor's name and mailing address Je'Renia Foster 2015 Great Bend Dr Durham, NC 27704 Date(s) debt was incurred _____ Last 4 digits of account number <u>7002</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 906 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.239	Nonpriority creditor's name and mailing address Felicia Foulks 142 Pacific Blvd Monessen, PA 15062 Date(s) debt was incurred _____ Last 4 digits of account number <u>7003</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 901 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.240	Nonpriority creditor's name and mailing address Aaron Fowler 4421 US Highway 64 W Mocksville, NC 27028 Date(s) debt was incurred _____ Last 4 digits of account number <u>7556</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 909 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.241	Nonpriority creditor's name and mailing address Nelson Fowler 1800 Roundhill Rd Apt 1601 Charleston, WV 25314 Date(s) debt was incurred _____ Last 4 digits of account number <u>7004</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 921 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.242	Nonpriority creditor's name and mailing address Melvin Fox 5213 Patrick Ln Wilson, NC 27893 Date(s) debt was incurred _____ Last 4 digits of account number <u>7005</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: 1 BD; Unit 920 (Annual Float)</u> <u>Unit Type: 1 BD; Unit 921 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.243	Nonpriority creditor's name and mailing address Patrick Froncek P.O. Box 178 North Apollo, PA 15673 Date(s) debt was incurred _____ Last 4 digits of account number <u>7008</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: 1 BD; Unit: 918 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.244	Nonpriority creditor's name and mailing address Christen Frye 8170 Two Mile Rd Lynchburg, SC 29080 Date(s) debt was incurred _____ Last 4 digits of account number <u>7009</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: STU; Unit 903 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.245	Nonpriority creditor's name and mailing address Jessica Fuller 326 Dalton Gang Aly Townville, SC 29689 Date(s) debt was incurred _____ Last 4 digits of account number <u>7010</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: STU; Unit: 905 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.246	Nonpriority creditor's name and mailing address Ted Furr, Jr. 2426 Old Camden Monroe Hwy Lancaster, SC 29720 Date(s) debt was incurred _____ Last 4 digits of account number <u>7012</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: 1 BD; Unit: 920 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.247	Nonpriority creditor's name and mailing address Evelyn Gaddy 3249 Maple Grove Church Rd Resaca, GA 30735 Date(s) debt was incurred _____ Last 4 digits of account number <u>7013</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: 1 BD; Unit 901 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.248	Nonpriority creditor's name and mailing address Amy Gage 309 Valley Road East Bend, NC 27018 Date(s) debt was incurred _____ Last 4 digits of account number <u>7014</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 906 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.249	Nonpriority creditor's name and mailing address Stanley Gales 5201 Peppercorn St Durham, NC 27704 Date(s) debt was incurred _____ Last 4 digits of account number <u>7017</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1BD; Unit: 901 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.250	Nonpriority creditor's name and mailing address Susan Ganson 4330 Witherow Rd Winston Salem, NC 27106 Date(s) debt was incurred _____ Last 4 digits of account number <u>7018</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1BD; Unit: 1118 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.251	Nonpriority creditor's name and mailing address Donna Ganza 1944 Fargo Des Plaines, IL 60018 Date(s) debt was incurred _____ Last 4 digits of account number <u>7019</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit 1115 (Biannual Float) Unit Type: STU; Unit 1114 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.252	Nonpriority creditor's name and mailing address Allen Garner 1626 White Rd Wilmington, NC 28405 Date(s) debt was incurred _____ Last 4 digits of account number <u>7020</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 902 (Biennial Points) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.253	Nonpriority creditor's name and mailing address Christy Garrett 7757 Morgan Creek Rd SE Leland, NC 28451 Date(s) debt was incurred _____ Last 4 digits of account number <u>7021</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 906 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.254	Nonpriority creditor's name and mailing address James Gaulding 59 Club House Rd Enigma, GA 31749 Date(s) debt was incurred _____ Last 4 digits of account number <u>7022</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 906 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.255	Nonpriority creditor's name and mailing address Ted Gean 11903 Broadmoor Ln Upper Marlboro, MD 20772 Date(s) debt was incurred _____ Last 4 digits of account number <u>7023</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 903 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.256	Nonpriority creditor's name and mailing address Jerry Gee, III 802 Highway 212 Covington, GA 30016 Date(s) debt was incurred _____ Last 4 digits of account number <u>7024</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 1116 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.257	Nonpriority creditor's name and mailing address Sherry Williams Gee 163 Highgrove Court Raeford, NC 28376 Date(s) debt was incurred _____ Last 4 digits of account number <u>7025</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 903 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.258	Nonpriority creditor's name and mailing address Charles George 5727 Jubilant Dr Rex, GA 30273 Date(s) debt was incurred _____ Last 4 digits of account number <u>7026</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 911 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.259	Nonpriority creditor's name and mailing address Tina Gerbino 821 Erie St Ronkonkoma, NY 11779 Date(s) debt was incurred _____ Last 4 digits of account number <u>7027</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 1115 (Annual Float)</u> Unit Type: <u>STU; Unit: 1114 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.260	Nonpriority creditor's name and mailing address Bonnie Goard 154 Via Mountain Ln Patrick Springs, VA 24133 Date(s) debt was incurred _____ Last 4 digits of account number <u>7032</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 1110 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.261	Nonpriority creditor's name and mailing address Carlisle Goforth, Jr. 231 Smithfield Cir Elgin, SC 29045 Date(s) debt was incurred _____ Last 4 digits of account number <u>7034</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 921 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.262	Nonpriority creditor's name and mailing address Richard Goodwin 236 Paynetown Rd Mount Airy, NC 27030 Date(s) debt was incurred _____ Last 4 digits of account number <u>7037</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 1107 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.263	Nonpriority creditor's name and mailing address Christopher Gordon 10317 Mahonia St, Unit 102 Charlotte, NC 28277 Date(s) debt was incurred _____ Last 4 digits of account number <u>7038</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 903 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.264	Nonpriority creditor's name and mailing address Benny Graham 352 Woodland Meadows Dr Mills River, NC 28759 Date(s) debt was incurred _____ Last 4 digits of account number <u>7039</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 914 (Annual Float)</u> Unit Type: <u>1BD; Unit 915 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known) _____
Name _____		
3.265	Nonpriority creditor's name and mailing address Josy Graham c/o US Consumer Attorneys-Henry Portner 1300 N. Johnson Ave, Ste 107 El Cajon, CA 92020 Date(s) debt was incurred ____ Last 4 digits of account number <u>7040</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 1115 (Annual Float)</u> Unit Type: <u>STU; Unit 1114 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.266	Nonpriority creditor's name and mailing address John Graves 2345 E 900 N Decatur, IN 46733 Date(s) debt was incurred ____ Last 4 digits of account number <u>7041</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 902 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.267	Nonpriority creditor's name and mailing address Jacqueline Green PO Box 1061 Holly Springs, NC 27519 Date(s) debt was incurred ____ Last 4 digits of account number <u>7043</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 905 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.268	Nonpriority creditor's name and mailing address Derrick Greene 3849 Wolverton Circle Lithonia, GA 30038 Date(s) debt was incurred ____ Last 4 digits of account number <u>7044</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 907 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.269	Nonpriority creditor's name and mailing address Joseph Gregory Date(s) debt was incurred ____ Last 4 digits of account number <u>7046</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 1101 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.270	Nonpriority creditor's name and mailing address Monique Gregory PO Box 1403 Saint Stephen, SC 29479 Date(s) debt was incurred ____ Last 4 digits of account number <u>7047</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 901 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.271	Nonpriority creditor's name and mailing address Stanley Griffin 1192 Slate Rd King, NC 27021 Date(s) debt was incurred _____ Last 4 digits of account number <u>7049</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 919 (Annual Float) Unit Type: STU; Unit: 905 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.272	Nonpriority creditor's name and mailing address Susan Griffin 4497 Highway 382 W Ellijay, GA 30540 Date(s) debt was incurred _____ Last 4 digits of account number <u>7050</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 910 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.273	Nonpriority creditor's name and mailing address William Griffith 2221 Mendota Rd Hiltons, VA 24258 Date(s) debt was incurred _____ Last 4 digits of account number <u>7051</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 1121 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.274	Nonpriority creditor's name and mailing address John Groce, Jr. 43 Eden Glen Rd Black Mountain, NC 28711 Date(s) debt was incurred _____ Last 4 digits of account number <u>7052</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit 902 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.275	Nonpriority creditor's name and mailing address Terry Grove c/o Mitchell Ree Sussman & Associates 1053 S. Palm Canyon Drive Palm Springs, CA 92264 Date(s) debt was incurred _____ Last 4 digits of account number <u>7053</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1BD; Unit 1115 (Biannual Float) Unit Type: STU; Unit 1114 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.276	Nonpriority creditor's name and mailing address John Guadalupe 16411 N 170th Ln Surprise, AZ 85388 Date(s) debt was incurred _____ Last 4 digits of account number <u>7054</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 902 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.277	Nonpriority creditor's name and mailing address Leonard Gunn, Jr. 929 S Woodstone Ln Nashville, TN 37211 Date(s) debt was incurred _____ Last 4 digits of account number <u>7055</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 919 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.278	Nonpriority creditor's name and mailing address Nick Gurick 7207 Flower Tuft Ct Springfield, VA 22153 Date(s) debt was incurred _____ Last 4 digits of account number <u>7057</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 904 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.279	Nonpriority creditor's name and mailing address Melissa Latoria Hairston 226 Parkland Dr Danville, VA 24540 Date(s) debt was incurred _____ Last 4 digits of account number <u>7059</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit 901 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.280	Nonpriority creditor's name and mailing address Timothy Hairston 145 Vernon Ln Axton, VA 24054 Date(s) debt was incurred _____ Last 4 digits of account number <u>7060</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit 910 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.281	Nonpriority creditor's name and mailing address Gary Hall RR 1 Box 150-5 Bluefield, WV 24701 Date(s) debt was incurred _____ Last 4 digits of account number <u>7061</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 919 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.282	Nonpriority creditor's name and mailing address Wanda Hall PO Box 824 339 Country Haven Dr Ridgeway, VA 24148 Date(s) debt was incurred _____ Last 4 digits of account number <u>7063</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 907 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.283	Nonpriority creditor's name and mailing address Kevin Hammond 18703 McLin Rd Livingston, LA 70754 Date(s) debt was incurred _____ Last 4 digits of account number <u>7065</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 904 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.284	Nonpriority creditor's name and mailing address Marion Hammond c/o Neally Law 122 Park Central Square Springfield, MO 65806 Date(s) debt was incurred _____ Last 4 digits of account number <u>7066</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 1103 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.285	Nonpriority creditor's name and mailing address David Hanner 760 Salem Rd Scranton, SC 29591 Date(s) debt was incurred _____ Last 4 digits of account number <u>7067</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 917 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.286	Nonpriority creditor's name and mailing address Earl Hanvey, Jr. 2200 Stuart Avenue Suffolk, VA 23434 Date(s) debt was incurred _____ Last 4 digits of account number <u>7068</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 1103 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.287	Nonpriority creditor's name and mailing address Jerome Hardy 1601 4th St NE Apt. 31 Hickory, NC 28601 Date(s) debt was incurred _____ Last 4 digits of account number <u>7070</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 901 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.288	Nonpriority creditor's name and mailing address Lisa Hargraves 7681 N. Main St PO Box 156 Kanona, NY 14856 Date(s) debt was incurred _____ Last 4 digits of account number <u>7071</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 902 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.289	Nonpriority creditor's name and mailing address John Harkness 12216 Saint Andrew's Way Fenton, MI 48430 Date(s) debt was incurred _____ Last 4 digits of account number <u>7072</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 1116 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.290	Nonpriority creditor's name and mailing address Grady Harmon 5007 Shaun Cir Huntsville, AL 35811 Date(s) debt was incurred _____ Last 4 digits of account number <u>7073</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 909 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.291	Nonpriority creditor's name and mailing address Daniel Harris 100 Carnation Dr Andrews, SC 29510 Date(s) debt was incurred _____ Last 4 digits of account number <u>7074</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 904 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.292	Nonpriority creditor's name and mailing address Ernest Harris 110 Concord Dr Apt 10 Greenville, NC 27834 Date(s) debt was incurred _____ Last 4 digits of account number <u>7075</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 912 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.293	Nonpriority creditor's name and mailing address Lateasha Harris PO Box 3572 Sumter, SC 29151 Date(s) debt was incurred _____ Last 4 digits of account number <u>7076</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 905 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.294	Nonpriority creditor's name and mailing address Stephen Harvilla 1611 Antler Ave Owensboro, KY 42303 Date(s) debt was incurred _____ Last 4 digits of account number <u>7079</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 1114 (Biennial Points) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.295	Nonpriority creditor's name and mailing address Charles Hatcher, Sr. 72 Hilendale Street Rochester, NY 14619 Date(s) debt was incurred _____ Last 4 digits of account number <u>7080</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1BD; Unit 1115 (Biannual Float) Unit Type: STU; Unit 1114 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.296	Nonpriority creditor's name and mailing address Larry Hatley 22461 Oakwood Rd Albemarle, NC 28001 Date(s) debt was incurred _____ Last 4 digits of account number <u>7081</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1BD; Unit: 1115 (Biannual Float) Unit Type: STU; Unit 1114 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.297	Nonpriority creditor's name and mailing address Frank Hawkins 248 Walcott Drive Lyman, SC 29365 Date(s) debt was incurred _____ Last 4 digits of account number <u>7083</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1BD; Unit: 1116 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.298	Nonpriority creditor's name and mailing address Elizabeth Hawks 166 Jill Farm Rd Mount Airy, NC 27030 Date(s) debt was incurred _____ Last 4 digits of account number <u>7084</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit 903 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.299	Nonpriority creditor's name and mailing address Tara Hawthorne 3204 Lawndle Dr Apt K Greensboro, NC 27408 Date(s) debt was incurred _____ Last 4 digits of account number <u>7085</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 919 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.300	Nonpriority creditor's name and mailing address Christine Haynes 118 Harvest Hill Trail Lexington, SC 29072 Date(s) debt was incurred _____ Last 4 digits of account number <u>7086</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 908 (Biannual Float)</u> Unit Type: <u>1BD; Unit 920 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.301	Nonpriority creditor's name and mailing address Lance Heasley 516 N Main St New Martinsville, WV 26155 Date(s) debt was incurred _____ Last 4 digits of account number <u>7088</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 914 (Biannual Float)</u> Unit Type: <u>1 BD; Unit 915 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.302	Nonpriority creditor's name and mailing address Doris Heath 1911 Canal Dr NW Wilson, NC 27896 Date(s) debt was incurred _____ Last 4 digits of account number <u>7089</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1BD; Unit: 1120 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.303	Nonpriority creditor's name and mailing address Neil Heddon 38105 Springwood Ave Prairieville, LA 70769 Date(s) debt was incurred _____ Last 4 digits of account number <u>7090</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 917 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.304	Nonpriority creditor's name and mailing address Terry Helms 28025 Harwood Rd New London, NC 28127 Date(s) debt was incurred _____ Last 4 digits of account number <u>7091</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 911 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.305	Nonpriority creditor's name and mailing address Pamela Helton 4526 Mineral Spgs Mountain Rd Connellys Springs, NC 28612 Date(s) debt was incurred _____ Last 4 digits of account number <u>7092</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 1106 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.306	Nonpriority creditor's name and mailing address Gregory Henderson 3505 Coleman Dr, Apt. 10 Kinston, NC 28504 Date(s) debt was incurred _____ Last 4 digits of account number <u>7093</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 903 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.307	Nonpriority creditor's name and mailing address Jared Hendrick 159 Meridian Ln Hillsville, VA 24343 Date(s) debt was incurred _____ Last 4 digits of account number <u>7094</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 919 (Annual Float)</u> Unit Type: <u>STU; Unit: 908 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.308	Nonpriority creditor's name and mailing address Charles Henkey 224 Apollo Dr Seneca, SC 29672 Date(s) debt was incurred _____ Last 4 digits of account number <u>7095</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 1116 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.309	Nonpriority creditor's name and mailing address Bertram Henry 14212 Pear Tree Lane Apt 41 Silver Spring, MD 20906 Date(s) debt was incurred _____ Last 4 digits of account number <u>7096</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 910 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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Name _____		
3.310	Nonpriority creditor's name and mailing address Richard Henry 6217 Saybrooke Dr Raleigh, NC 27616 Date(s) debt was incurred _____ Last 4 digits of account number <u>7098</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 910 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.311	Nonpriority creditor's name and mailing address Shane Hewitt 61 Pecan Ave Cheraw, SC 29520 Date(s) debt was incurred _____ Last 4 digits of account number <u>7101</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit 915 (Biannual Float) Unit Type: STU; Unit 914 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.312	Nonpriority creditor's name and mailing address Thomas Hickle 1006 Woodridge Ln Yadkinville, NC 27055 Date(s) debt was incurred _____ Last 4 digits of account number <u>7102</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 905 (Annual Float) Unit Type: 1 BD; Unit: 919 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.313	Nonpriority creditor's name and mailing address Charles High 1201 Amber Pines Dr Leland, NC 28451 Date(s) debt was incurred _____ Last 4 digits of account number <u>7103</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1BD; Unit: 915 (Biannual Float) Unit Type: STU; Unit 914 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.314	Nonpriority creditor's name and mailing address Fallon Hill 10 Brittle Creek Ln Simpsonville, SC 29544 Date(s) debt was incurred _____ Last 4 digits of account number <u>7104</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 904 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.315	Nonpriority creditor's name and mailing address James Hill 7314 Thorngrove Pike Knoxville, TN 37914 Date(s) debt was incurred _____ Last 4 digits of account number <u>7105</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 908 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.316	Nonpriority creditor's name and mailing address Michelle Hillman 1171 Cattail Point Johnson City, TN 37601 Date(s) debt was incurred _____ Last 4 digits of account number <u>3142</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 904 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.317	Nonpriority creditor's name and mailing address Devonue Hinson 3685 Longtown Rd Ridgeway, SC 29130 Date(s) debt was incurred _____ Last 4 digits of account number <u>7106</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 907 (Biannual Float)</u> Unit Type: <u>! BD; Unit: 919 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.318	Nonpriority creditor's name and mailing address Kenneth Hobson 2700 Linda Ln East Bend, NC 27018 Date(s) debt was incurred _____ Last 4 digits of account number <u>7108</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 1101 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.319	Nonpriority creditor's name and mailing address Anthony Hodges 2000 Wynnnton Rd, Apt F47 Columbus, GA 31906 Date(s) debt was incurred _____ Last 4 digits of account number <u>7110</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 902 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.320	Nonpriority creditor's name and mailing address Christine M. Hodges 512 E Lake Ct Woodstock, GA 30188 Date(s) debt was incurred _____ Last 4 digits of account number <u>7111</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 905 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.321	Nonpriority creditor's name and mailing address Joyce Hoffman 8405 Dunmore Dr, Apt. A Huntersville, NC 28025 Date(s) debt was incurred _____ Last 4 digits of account number <u>7113</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 917 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.322	Nonpriority creditor's name and mailing address Cynthia Holder 27 Francis St Westfield, MA 01085 Date(s) debt was incurred _____ Last 4 digits of account number <u>7114</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 916 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.323	Nonpriority creditor's name and mailing address Segee Holley 111 Cockfield St Pamplico, SC 29583 Date(s) debt was incurred _____ Last 4 digits of account number <u>7221</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 908 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.324	Nonpriority creditor's name and mailing address Azeem Holman 624 2nd St. Pl. SW Conover, NC 28613 Date(s) debt was incurred _____ Last 4 digits of account number <u>7116</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 920 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.325	Nonpriority creditor's name and mailing address Jacquelyne Holman 1000 Belmont Park Dr Union, KY 41091 Date(s) debt was incurred _____ Last 4 digits of account number <u>7117</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1BD; Unit: 1117 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.326	Nonpriority creditor's name and mailing address Melissa Hoots 2180 Waterview Dr Unit 133 North Myrtle Beach, SC 29582-9450 Date(s) debt was incurred _____ Last 4 digits of account number <u>7118</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 1103 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

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3.327	Nonpriority creditor's name and mailing address Eldon Hopkins, III 57 Burr Ave Acushnet, MA 02743 Date(s) debt was incurred _____ Last 4 digits of account number <u>7120</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 903 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.328	Nonpriority creditor's name and mailing address Reginald Hopkins 6651 Terrace Park Ct Raleigh, NC 27616 Date(s) debt was incurred _____ Last 4 digits of account number <u>7119</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 1116 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.329	Nonpriority creditor's name and mailing address Tarrin Horne 1665 W Wall St Wadesboro, NC 28170 Date(s) debt was incurred _____ Last 4 digits of account number <u>7121</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 907 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.330	Nonpriority creditor's name and mailing address John Howell 64 High St Portsmouth, OH 45662 Date(s) debt was incurred _____ Last 4 digits of account number <u>7122</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 916 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.331	Nonpriority creditor's name and mailing address Juanita Howell 200 Dog Pond Road Seven Springs, NC 28578 Date(s) debt was incurred _____ Last 4 digits of account number <u>7123</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 1104 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.332	Nonpriority creditor's name and mailing address Michael Hudson 796 Tulls Creek Rd Moyock, NC 27958 Date(s) debt was incurred _____ Last 4 digits of account number <u>7124</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 905 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.333	Nonpriority creditor's name and mailing address Sandy Huggins 16084 Lappin St Detroit, MI 48205 Date(s) debt was incurred ____ Last 4 digits of account number <u>7125</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 1103 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.334	Nonpriority creditor's name and mailing address Gary Hughes 437 Fairfax Dr Gastonia, NC 28056 Date(s) debt was incurred ____ Last 4 digits of account number <u>7126</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 1112 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.335	Nonpriority creditor's name and mailing address Michelle Hughey 535 Old Ironworks Rd Spartanburg, SC 29302 Date(s) debt was incurred ____ Last 4 digits of account number <u>7128</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1BD; Unit: 1118 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.336	Nonpriority creditor's name and mailing address Darrell Hunt 309 Catawba Ave Hickory, NC 28601 Date(s) debt was incurred ____ Last 4 digits of account number <u>0856</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 903 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.337	Nonpriority creditor's name and mailing address James Hunter 1260 Woodvale Dr Gallatin, TN 37066 Date(s) debt was incurred ____ Last 4 digits of account number <u>7129</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 908 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.338	Nonpriority creditor's name and mailing address Ronald Hunter 6 Jordan Crest Ct Simpsonville, SC 29681 Date(s) debt was incurred ____ Last 4 digits of account number <u>7130</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 910 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.339	Nonpriority creditor's name and mailing address Dorothy Hurst 3853 Parwood Rd Blythe, GA 30805 Date(s) debt was incurred _____ Last 4 digits of account number <u>7131</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 906 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.340	Nonpriority creditor's name and mailing address Pearline Hutto PO Box 172 Pageland, SC 29728 Date(s) debt was incurred _____ Last 4 digits of account number <u>7132</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1BD; Unit: 917 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.341	Nonpriority creditor's name and mailing address Janis Ikaunieks 415 N Lexington Pkwy De Forest, WI 53532 Date(s) debt was incurred _____ Last 4 digits of account number <u>7133</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 912 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.342	Nonpriority creditor's name and mailing address Charles Isaac 333 Wexford Dr Hinesville, GA 31313 Date(s) debt was incurred _____ Last 4 digits of account number <u>7134</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 917 (Biannual Float)</u> Unit Type: <u>STU; Unit: 906 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.343	Nonpriority creditor's name and mailing address Sandra Isenhour 98 Mosebrook Drive Gladys, VA 24554 Date(s) debt was incurred _____ Last 4 digits of account number <u>7135</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 1114 (Annual Float)</u> Unit Type: <u>1BD; Unit 1115 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.344	Nonpriority creditor's name and mailing address James Jacks 354 Chime Bell Church Rd Aiken, SC 29803 Date(s) debt was incurred _____ Last 4 digits of account number <u>7136</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 920 (Annual Float) Unit Type: 1 BD; Unit: 921 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.345	Nonpriority creditor's name and mailing address Allen Jackson 185 Jones Pond Rd Polkton, NC 28135 Date(s) debt was incurred _____ Last 4 digits of account number <u>7137</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit 906 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.346	Nonpriority creditor's name and mailing address Charles Jackson 8000 Robincrest Ct, # C Fuquay Varina, NC 27526 Date(s) debt was incurred _____ Last 4 digits of account number <u>7138</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 907 (Annual Points) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.347	Nonpriority creditor's name and mailing address Jerry Jackson, Jr. 205 Tuscon Dr Sumter, SC 29150 Date(s) debt was incurred _____ Last 4 digits of account number <u>7140</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 917 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.348	Nonpriority creditor's name and mailing address Mary Jackson c/o Shelby Law P.C. 116 N West Street Lebanon, IN 46052 Date(s) debt was incurred _____ Last 4 digits of account number <u>7139</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 909 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.349	Nonpriority creditor's name and mailing address Hubert Jacobs 135 Monica Rd Orangeburg, SC 29118 Date(s) debt was incurred _____ Last 4 digits of account number <u>7141</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit 1105 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.350	Nonpriority creditor's name and mailing address Kismith James 2843 Cobblestone St Florence, SC 29506 Date(s) debt was incurred _____ Last 4 digits of account number <u>7142</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 907 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.351	Nonpriority creditor's name and mailing address Kimberly Jarrell 678 Citrus Petal Rd Fuquay Varina, NC 27526 Date(s) debt was incurred _____ Last 4 digits of account number <u>8708</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 919 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.352	Nonpriority creditor's name and mailing address Omar Jenkins 337 Lynn Shores Dr Virginia Beach, VA 23452 Date(s) debt was incurred _____ Last 4 digits of account number <u>7143</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 1101 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.353	Nonpriority creditor's name and mailing address Johnson's Furniture Co. 3015 Bashor Road Conway, SC 29526 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$608.22</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods Provided</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.354	Nonpriority creditor's name and mailing address Alice Johnson 96 Jerusalem Dr Kingstree, SC 29556 Date(s) debt was incurred _____ Last 4 digits of account number <u>7146</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 914 (Annual Float)</u> Unit Type: <u>1 BD; Unit 915 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.355	Nonpriority creditor's name and mailing address Beth Johnson 406 Crystal Springs Rd Graniteville, SC 29829 Date(s) debt was incurred _____ Last 4 digits of account number <u>7147</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 917 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known) _____
Name _____		
3.356	Nonpriority creditor's name and mailing address Cheryl Johnson 7501 Riding Trail Rd Charlotte, NC 28212 Date(s) debt was incurred _____ Last 4 digits of account number <u>7148</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 1115 (Annual Float)</u> Unit Type: <u>STU; Unit: 1114 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.357	Nonpriority creditor's name and mailing address Elvis Johnson 110 Lyndhurst St Spartanburg, SC 29307 Date(s) debt was incurred _____ Last 4 digits of account number <u>7149</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 909 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.358	Nonpriority creditor's name and mailing address John Johnson 721 Milby Dr Chesapeake, VA 23325 Date(s) debt was incurred _____ Last 4 digits of account number <u>7150</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 916 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.359	Nonpriority creditor's name and mailing address Wanda Johnson 5470 Camp Creek Rd Lancaster, SC 29720 Date(s) debt was incurred _____ Last 4 digits of account number <u>7151</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 902 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.360	Nonpriority creditor's name and mailing address William Johnson 205 Cloniger Dr Thomasville, NC 27360 Date(s) debt was incurred _____ Last 4 digits of account number <u>0488</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 1108 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.361	Nonpriority creditor's name and mailing address Aaron Jolly 1001 County Home Rd Taylorsville, NC 28681 Date(s) debt was incurred _____ Last 4 digits of account number <u>7153</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 919 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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Name _____		
3.362	Nonpriority creditor's name and mailing address Gary Jones PO Box 15483 Surfside, SC 29587 Date(s) debt was incurred _____ Last 4 digits of account number <u>7154</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 917 (Annual Float)</u> Unit Type: <u>STU; Unit: 905 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.363	Nonpriority creditor's name and mailing address Melondy Jones 1013 Meadow Oaks Dr Hartsville, SC 29550 Date(s) debt was incurred _____ Last 4 digits of account number <u>7158</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 903 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.364	Nonpriority creditor's name and mailing address Michael Jones 140 Parkview Ter Athens, WV 24712 Date(s) debt was incurred _____ Last 4 digits of account number <u>7160</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 902 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.365	Nonpriority creditor's name and mailing address Michael Jones 4823 Cedar Ave Philadelphia, PA 19143 Date(s) debt was incurred _____ Last 4 digits of account number <u>7159</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 914 (Biannual Float)</u> Unit Type: <u>1 BD; Unit 915 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.366	Nonpriority creditor's name and mailing address Rodridgus Jones 2665 Glenrose Hill Atlanta, GA 30341 Date(s) debt was incurred _____ Last 4 digits of account number <u>7161</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 902 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor		Case number (if known)	
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3.367	Nonpriority creditor's name and mailing address Sanford Jones 155 County Line Ct Fayetteville, GA 30215 Date(s) debt was incurred ____ Last 4 digits of account number <u>7162</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 907 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.368	Nonpriority creditor's name and mailing address Troy Jones 5500 Westcott Cir Frederick, MD 21703 Date(s) debt was incurred ____ Last 4 digits of account number <u>7163</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 921 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.369	Nonpriority creditor's name and mailing address Emily Jordan 2903 Forest Hill Dr Columbus, GA 31907 Date(s) debt was incurred ____ Last 4 digits of account number <u>7164</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 1117 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.370	Nonpriority creditor's name and mailing address Kimberly Jordan 1024 Bennett Road Ellerbe, NC 28338 Date(s) debt was incurred ____ Last 4 digits of account number <u>7165</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 902 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.371	Nonpriority creditor's name and mailing address Robert Joyner, Jr. 1095 Reynolds Manor Dr Winston Salem, NC 27107 Date(s) debt was incurred ____ Last 4 digits of account number <u>7166</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 901 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.372	Nonpriority creditor's name and mailing address Kaba Ilco Inc. PO Box 896502 Charlotte, NC 28289 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$892.82

Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known) _____
Name _____		
3.373	Nonpriority creditor's name and mailing address Christine Kays 1342 Old Princeton Rd New Castle, PA 16101 Date(s) debt was incurred _____ Last 4 digits of account number <u>7167</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 916 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.374	Nonpriority creditor's name and mailing address Ventura Keels 4120 Windmill Cir Randallstown, MD 21133 Date(s) debt was incurred _____ Last 4 digits of account number <u>7168</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 915 (Biannual Float)</u> Unit Type: <u>STUI; Unit: 914 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.375	Nonpriority creditor's name and mailing address Lucia Keiger 147 McKendree Rd Mooreville, NC 28117 Date(s) debt was incurred _____ Last 4 digits of account number <u>7169</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 1115 (Biannual Float)</u> Unit Type: <u>STU; Unit: 1114 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.376	Nonpriority creditor's name and mailing address Benjie Keith 2340 Seattle Bridges Rd Stoneville, NC 27048 Date(s) debt was incurred _____ Last 4 digits of account number <u>7171</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 903 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.377	Nonpriority creditor's name and mailing address David Keith 1775 Westchester Dr Apt # 116 High Point, NC 27262 Date(s) debt was incurred _____ Last 4 digits of account number <u>7172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD1; Unit: 919 (Annual Float)</u> Unit Type: <u>STU; Unit 903 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.378	Nonpriority creditor's name and mailing address Donald Kelley PO Box 58183 Charleston, WV 25358 Date(s) debt was incurred _____ Last 4 digits of account number <u>7173</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 1108 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.379	Nonpriority creditor's name and mailing address Inez Kelly 13728 Marven Drive North Huntingtor, PA 15642 Date(s) debt was incurred _____ Last 4 digits of account number <u>7174</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1BD; Unit: 1120 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.380	Nonpriority creditor's name and mailing address Marvin Kemmerer 1774 Pertl Rd Odessa, NY 14869 Date(s) debt was incurred _____ Last 4 digits of account number <u>7175</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 905 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.381	Nonpriority creditor's name and mailing address Joshua Kenyon PO Box 2504 Acworth, GA 30083 Date(s) debt was incurred _____ Last 4 digits of account number <u>7176</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 920 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.382	Nonpriority creditor's name and mailing address Phil Kesterson, Sr. 6481 Leepers Ferry Rd White Pine, TN 37890 Date(s) debt was incurred _____ Last 4 digits of account number <u>7177</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 902 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.383	Nonpriority creditor's name and mailing address Brenda Key 1046 Outaways Rd Aiken, SC 29803 Date(s) debt was incurred _____ Last 4 digits of account number <u>7178</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 903 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.384	Nonpriority creditor's name and mailing address Donald Key 5559 Leesville St Trinity, NC 27370 Date(s) debt was incurred _____ Last 4 digits of account number <u>7179</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 908 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.385	Nonpriority creditor's name and mailing address Eloise Kiaku 2005 Bowman Ln Raleigh, NC 27610 Date(s) debt was incurred _____ Last 4 digits of account number <u>7180</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 905 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.386	Nonpriority creditor's name and mailing address Jesse Kiger, II 110 Work St Paden City, WV 26159 Date(s) debt was incurred _____ Last 4 digits of account number <u>7181</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 901 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.387	Nonpriority creditor's name and mailing address Kenneth Kimber 5518 Pebble Garden Ct Greensboro, NC 27407 Date(s) debt was incurred _____ Last 4 digits of account number <u>7182</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 902 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.388	Nonpriority creditor's name and mailing address Shonda King 2057 Shell Road Riceboro, GA 31323 Date(s) debt was incurred _____ Last 4 digits of account number <u>7183</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1BD; Unit: 916 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.389	Nonpriority creditor's name and mailing address David Kinney 1340 Jacksonville Smithville Rd Bordentown, NJ 08505 Date(s) debt was incurred _____ Last 4 digits of account number <u>7184</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 918 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.390	Nonpriority creditor's name and mailing address George Kirby 1203 Cannon Bridge Rd Cordova, SC 29039 Date(s) debt was incurred _____ Last 4 digits of account number <u>7185</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: NOTICE PURPOSES ONLY <u>Unit Type: STU; Unit: 904 (Biennial Points)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.391	Nonpriority creditor's name and mailing address Nicholas Kleifgen 930 21st Ave South Wisconsin Rapids, WI 54495 Date(s) debt was incurred _____ Last 4 digits of account number <u>7186</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: NOTICE PURPOSES ONLY <u>Unit Type: 1 BD; Unit: 920 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.392	Nonpriority creditor's name and mailing address Ronald Knipp 38 Amicus St Taneytown, MD 21787 Date(s) debt was incurred _____ Last 4 digits of account number <u>7187</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: NOTICE PURPOSES ONLY <u>Unit Type: 1 BD; Unit 901 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.393	Nonpriority creditor's name and mailing address L. Kocher 459 Ross Road Columbus, OH 43213 Date(s) debt was incurred _____ Last 4 digits of account number <u>7188</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: NOTICE PURPOSES ONLY <u>Unit Type: STU; Unit: 909 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.394	Nonpriority creditor's name and mailing address John Kohn PO Box 178 Gorham, NY 14461 Date(s) debt was incurred _____ Last 4 digits of account number <u>7189</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: NOTICE PURPOSES ONLY <u>Unit Type: STU; Unit: 906 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.395	Nonpriority creditor's name and mailing address Gregory Kranefuss 4917 Miranda Dr Hope Mills, NC 28348 Date(s) debt was incurred _____ Last 4 digits of account number <u>7190</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: NOTICE PURPOSES ONLY <u>Unit Type: STU; Unit: 902 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known) _____
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3.396	Nonpriority creditor's name and mailing address Larry Krause 1076 Spiers Landing Rd Cross, SC 29436 Date(s) debt was incurred _____ Last 4 digits of account number <u>7191</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 903 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.397	Nonpriority creditor's name and mailing address Kevin Kube 70 Tobacco Farm Way Chapel Hill, NC 27516 Date(s) debt was incurred _____ Last 4 digits of account number <u>7192</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 919 (Annual Float) Unit Type: STU; Unit: 909 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.398	Nonpriority creditor's name and mailing address Lisa Kurowski 8071 Route 16 Franklinville, NY 14737 Date(s) debt was incurred _____ Last 4 digits of account number <u>7193</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit 903 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.399	Nonpriority creditor's name and mailing address James Lajsic 8756 W Mallard Ct Franklin, WI 53132 Date(s) debt was incurred _____ Last 4 digits of account number <u>7194</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 919 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.400	Nonpriority creditor's name and mailing address Aaron Lambert 2521 S 68th St Philadelphia, PA 19142 Date(s) debt was incurred _____ Last 4 digits of account number <u>7195</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 909 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.401	Nonpriority creditor's name and mailing address Daniel Lambo, Jr. 8715 KY 1304 Girdler, KY 40943 Date(s) debt was incurred _____ Last 4 digits of account number <u>7196</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 901 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.402	Nonpriority creditor's name and mailing address Patrick Landry 1308 Clan Campbell Dr Raeford, NC 28376 Date(s) debt was incurred _____ Last 4 digits of account number <u>7197</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: 1 BD; Unit 917 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.403	Nonpriority creditor's name and mailing address Gregory Lane 379 Nathan Dr Lumberton, NC 28358 Date(s) debt was incurred _____ Last 4 digits of account number <u>7198</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: STU; Unit: 905 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.404	Nonpriority creditor's name and mailing address Morgan Lane 284 College Avenue Oshawa, ON Date(s) debt was incurred _____ Last 4 digits of account number <u>7199</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: 1BD; Unit: 919 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.405	Nonpriority creditor's name and mailing address LaTour Hotels & Resorts, Inc. One Vance Gap Road Asheville, NC 28805 Date(s) debt was incurred <u>As of January 31, 2019</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$61,414.98 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Management Fees and reimbursable expenses</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.406	Nonpriority creditor's name and mailing address LaTour Hotels & Resorts, Inc. One Vance Gap Road Asheville, NC 28805 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$75,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Money loaned - Note payment due</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.407	Nonpriority creditor's name and mailing address Felicia Lawrence 292 Partridge Rd Orangeburg, SC 29118 Date(s) debt was incurred _____ Last 4 digits of account number <u>7202</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: STU; Unit 911 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known) _____
Name _____		
3.408	Nonpriority creditor's name and mailing address Cheyenne Lawson PO Box 173 Sardinia, OH 45171 Date(s) debt was incurred _____ Last 4 digits of account number <u>7203</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 921 (Biannual Float) Unit Type: 1 BD; Unit 921 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.409	Nonpriority creditor's name and mailing address Geno Lawson 10017 S Forest Chicago, IL 60628 Date(s) debt was incurred _____ Last 4 digits of account number <u>7204</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit 1101 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.410	Nonpriority creditor's name and mailing address John Lawson, Sr. 6230 S Main St Salisbury, NC 28147 Date(s) debt was incurred _____ Last 4 digits of account number <u>7205</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 905 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.411	Nonpriority creditor's name and mailing address John Le 2309 Oakhurst Trl Hillsborough, NC 27278 Date(s) debt was incurred _____ Last 4 digits of account number <u>7208</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 903 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.412	Nonpriority creditor's name and mailing address Jesse Leake, Jr. 511 Latta Rd Durham, NC 27712 Date(s) debt was incurred _____ Last 4 digits of account number <u>7209</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1BD; Unit 917 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.413	Nonpriority creditor's name and mailing address Larry Lee, Jr. 2027 Indigo Drive Richmond, KY 40475 Date(s) debt was incurred _____ Last 4 digits of account number <u>7211</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 1116 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known) _____
Name _____		
3.414	Nonpriority creditor's name and mailing address Michael Leininger 201 Westminster Way Elyria, OH 44035 Date(s) debt was incurred _____ Last 4 digits of account number <u>7214</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 905 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.415	Nonpriority creditor's name and mailing address Robert W. Lena 1340 North West 20th Ave Apt #202 Boca Raton, FL 33445 Date(s) debt was incurred _____ Last 4 digits of account number <u>7215</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit 915 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.416	Nonpriority creditor's name and mailing address Jessie Leonard 149 Titan Rd Stockbridge, GA 30281 Date(s) debt was incurred _____ Last 4 digits of account number <u>7216</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 910 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.417	Nonpriority creditor's name and mailing address Letitia Leonard 143 Morton Rd Simpsonville, SC 29681 Date(s) debt was incurred _____ Last 4 digits of account number <u>0231</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit 905 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.418	Nonpriority creditor's name and mailing address Calvin Lester 530 Beacon St Camden, NJ 08105 Date(s) debt was incurred _____ Last 4 digits of account number <u>7217</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 909 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.419	Nonpriority creditor's name and mailing address Darren Lewis 1917 Mills B Lane Blvd Savannah, GA 31405 Date(s) debt was incurred _____ Last 4 digits of account number <u>7219</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 905 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known)
Name		
3.420	Nonpriority creditor's name and mailing address Richard Lewis 5100 N Burning Bush Rd Columbia, MO 65202 Date(s) debt was incurred ____ Last 4 digits of account number <u>7220</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 906 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.421	Nonpriority creditor's name and mailing address Brad Lingerfelt 2915 High Peak Rd Valdese, NC 28690 Date(s) debt was incurred ____ Last 4 digits of account number <u>1519</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 905 (Annual Float)</u> Unit Type: <u>1 BD; Unit 919 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.422	Nonpriority creditor's name and mailing address Dennis Link 44 Gasper Rd Grove City, PA 16127 Date(s) debt was incurred ____ Last 4 digits of account number <u>7226</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 920 (Annual Float)</u> Unit Type: <u>1 BD; Unit: 921 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.423	Nonpriority creditor's name and mailing address Shyella Lisbon 103 Longpine Pl, Apt 2A Windsor Mill, MD 21244 Date(s) debt was incurred ____ Last 4 digits of account number <u>7227</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 919 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.424	Nonpriority creditor's name and mailing address John Lockhart 513 Hillwood Cir Augusta, GA 30909 Date(s) debt was incurred ____ Last 4 digits of account number <u>7229</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 910 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known) _____
Name _____		
3.425	Nonpriority creditor's name and mailing address Billy Lockhart, Jr. 4618 Colonial Cir Trinity, NC 27292 Date(s) debt was incurred _____ Last 4 digits of account number <u>7228</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 906 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.426	Nonpriority creditor's name and mailing address Patrick Lockhart 4103 Laurel Creek Dr Greensboro, NC 27405 Date(s) debt was incurred _____ Last 4 digits of account number <u>7230</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 902 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.427	Nonpriority creditor's name and mailing address Billie Locklear 7323 Walters Rd Laurel Hill, NC 28351 Date(s) debt was incurred _____ Last 4 digits of account number <u>7231</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 903 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.428	Nonpriority creditor's name and mailing address James Long 11 Mainee Ct Owings Mills, MD 21117 Date(s) debt was incurred _____ Last 4 digits of account number <u>7234</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 902 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.429	Nonpriority creditor's name and mailing address Steven Lowder 2272 E Springfield Place Chandler, AZ 85286 Date(s) debt was incurred _____ Last 4 digits of account number <u>7237</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 915 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.430	Nonpriority creditor's name and mailing address Todd Lowe 129 S Maple St Mooresville, NC 28115 Date(s) debt was incurred _____ Last 4 digits of account number <u>7238</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 914 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known) _____
Name _____		
3.431	Nonpriority creditor's name and mailing address Keith Lowery PO Box 954 Ellenboro, NC 28040 Date(s) debt was incurred _____ Last 4 digits of account number <u>7239</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 916 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.432	Nonpriority creditor's name and mailing address LR Rentals Real Estate, LLC Attn: Woody Labar 820 2nd St#16 Cheney, WA 99004 Date(s) debt was incurred _____ Last 4 digits of account number <u>9278</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 1105 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.433	Nonpriority creditor's name and mailing address Rogelio Lunch 1867 Bee Gee Rd Lumberton, NC 28358 Date(s) debt was incurred _____ Last 4 digits of account number <u>7243</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 901 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.434	Nonpriority creditor's name and mailing address James Lundy 2843 Tracy Terrace Port Colborne, Ontario, L3K 5V3, Canada Date(s) debt was incurred _____ Last 4 digits of account number <u>7240</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 915 (Annual Float)</u> Unit Type: <u>STU; Unit: 914 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.435	Nonpriority creditor's name and mailing address Todd Lutkenhaus 1630 Vanderbilt Ct Graham, NC 27253 Date(s) debt was incurred _____ Last 4 digits of account number <u>7241</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 914 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known) _____
Name _____		
3.436	Nonpriority creditor's name and mailing address Michael Lynch 2 E Croton Dr Lake Carmel, NY 10512 Date(s) debt was incurred _____ Last 4 digits of account number <u>7242</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 915 (Annual Float)</u> Unit Type: <u>STU; Unit 914 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.437	Nonpriority creditor's name and mailing address Rosemary Lynch 510 Junction Place The Villages, FL 32163-4043 Date(s) debt was incurred _____ Last 4 digits of account number <u>7244</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 1104 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.438	Nonpriority creditor's name and mailing address James Lynd 11 Seiler Rd Portsmouth, OH 45662 Date(s) debt was incurred _____ Last 4 digits of account number <u>7245</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 904 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.439	Nonpriority creditor's name and mailing address Michael Lyons 206 Cloverdale Dr Durham, NC 27703 Date(s) debt was incurred _____ Last 4 digits of account number <u>7246</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 1114 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.440	Nonpriority creditor's name and mailing address Ricky Lyons 222 Summit Park Ct Kannapolis, NC 28083 Date(s) debt was incurred _____ Last 4 digits of account number <u>7247</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 904 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.441	Nonpriority creditor's name and mailing address Lesley Lyttle 115 South Everett St Bennettsville, SC 29512 Date(s) debt was incurred _____ Last 4 digits of account number <u>7248</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 1103 (Annual Points)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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Name _____		
3.442	Nonpriority creditor's name and mailing address John MaCauley 208 Meadowbrook Drive Seneca, SC 29678 Date(s) debt was incurred _____ Last 4 digits of account number <u>7275</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit 905 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.443	Nonpriority creditor's name and mailing address Michael Madison 2367 Blackthorn Dr Franklin, IN 46131-6811 Date(s) debt was incurred _____ Last 4 digits of account number <u>7250</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1BD; Unit: 919 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.444	Nonpriority creditor's name and mailing address Kimberly Magruder 5601 Dover St Churchton, MD 20733 Date(s) debt was incurred _____ Last 4 digits of account number <u>7251</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 914 (Annual Float) Unit Type: 1 BD; Unit 915 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.445	Nonpriority creditor's name and mailing address Alice Mahon 110 Crawford Rd Gray Court, SC 29645 Date(s) debt was incurred _____ Last 4 digits of account number <u>7549</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit 1116 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.446	Nonpriority creditor's name and mailing address Julie Maloney 6880 Garber Road Knoxville, TN 37917-3250 Date(s) debt was incurred _____ Last 4 digits of account number <u>7252</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit 1116 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.447	Nonpriority creditor's name and mailing address Steven Mangus 307 S Sandy Brook Way Simpsonville, SC 29680 Date(s) debt was incurred _____ Last 4 digits of account number <u>7253</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 908 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known) _____
Name _____		
3.448	Nonpriority creditor's name and mailing address Bryan Manion 593 McDermott Pond Creek Road Mc Dermott, OH 45652 Date(s) debt was incurred _____ Last 4 digits of account number <u>7254</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 904 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.449	Nonpriority creditor's name and mailing address Derek Manns PO Box 511 Stokesdale, NC 27357 Date(s) debt was incurred _____ Last 4 digits of account number <u>7255</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 914 (Biannual Float)</u> Unit Type: <u>1 BD; Unit 915 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.450	Nonpriority creditor's name and mailing address Meoshi Manns 1042 Charlotte Ln Walnut Cove, NC 27052 Date(s) debt was incurred _____ Last 4 digits of account number <u>7256</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 901 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.451	Nonpriority creditor's name and mailing address Sue Marks 109 Byrd Dr Martinsburg, WV 25401 Date(s) debt was incurred _____ Last 4 digits of account number <u>7259</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1BD; Unit: 915 (Annual Points)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.452	Nonpriority creditor's name and mailing address Tiffany Marrow 2146 Charles St, Apt 53 Durham, NC 27707 Date(s) debt was incurred _____ Last 4 digits of account number <u>7260</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 907 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.453	Nonpriority creditor's name and mailing address Kimberly Marshall 615 E. Pacific Street Springfield, MO 65803 Date(s) debt was incurred _____ Last 4 digits of account number <u>5755</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 1107 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.454	Nonpriority creditor's name and mailing address Shaunita Marshall 11351 Beringer Ct Waldorf, MD 20601 Date(s) debt was incurred _____ Last 4 digits of account number <u>7058</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 918 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.455	Nonpriority creditor's name and mailing address Donna Martin PO Box 1644 Hamlet, NC 28345 Date(s) debt was incurred _____ Last 4 digits of account number <u>7261</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 1101 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.456	Nonpriority creditor's name and mailing address Geovonda Martin 200 Old Boiling Springs Rd, Apt D62 Greer, SC 29650 Date(s) debt was incurred _____ Last 4 digits of account number <u>7262</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 902 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.457	Nonpriority creditor's name and mailing address James Martin 6679 Shelter Bay Road, Unit 23 Mississauga, ON, L5N 2A2, Canada Date(s) debt was incurred _____ Last 4 digits of account number <u>7263</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 1103 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.458	Nonpriority creditor's name and mailing address Rosalie Martin 895 Laurel Ridge Rd Reinholds, PA 17569 Date(s) debt was incurred _____ Last 4 digits of account number <u>7264</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 901 (Biennial Points)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.459	Nonpriority creditor's name and mailing address Rodney A. Mason 99 Hudson St, 5th Floor New York, NY 10013 Date(s) debt was incurred _____ Last 4 digits of account number <u>7266</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 917 (Annual Float)</u> Unit Type: <u>STU; Unit 914 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.460	Nonpriority creditor's name and mailing address Michael Masotto 73 White Ave Sharon, PA 16146 Date(s) debt was incurred _____ Last 4 digits of account number <u>7267</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 917 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.461	Nonpriority creditor's name and mailing address Willie Mathis 2725 Spirit Creek Rd Hephzibah, GA 30815 Date(s) debt was incurred _____ Last 4 digits of account number <u>7269</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 918 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.462	Nonpriority creditor's name and mailing address Connie Mauldin 101 Sunset Dr Mount Holly, NC 28120 Date(s) debt was incurred _____ Last 4 digits of account number <u>7270</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 902 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.463	Nonpriority creditor's name and mailing address Lynn McAdams 1146 Annelle Dr Florence, SC 29505 Date(s) debt was incurred _____ Last 4 digits of account number <u>7272</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 919 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.464	Nonpriority creditor's name and mailing address Brian McCann 3 Lake Dr Freeburg, IL 62243 Date(s) debt was incurred _____ Last 4 digits of account number <u>7274</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 911 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.465	Nonpriority creditor's name and mailing address John McCauley 208 Meadowbrook Dr Seneca, SC 29678 Date(s) debt was incurred _____ Last 4 digits of account number <u>7275</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 905 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.466	Nonpriority creditor's name and mailing address David McCormick, Sr. 1828 Castleberry Rd Clayton, NC 27527 Date(s) debt was incurred _____ Last 4 digits of account number <u>7276</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 914 (Biennial Points) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.467	Nonpriority creditor's name and mailing address Christine McCracken 148B Idlewild Dr Randleman, NC 27317 Date(s) debt was incurred _____ Last 4 digits of account number <u>7278</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 921 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.468	Nonpriority creditor's name and mailing address Donna McCraw 320 Endless Dr Greer, SC 29651 Date(s) debt was incurred _____ Last 4 digits of account number <u>7279</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 917 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.469	Nonpriority creditor's name and mailing address Kevin McCray 307 Bald Eagle Ct Moncks Corner, SC 29461 Date(s) debt was incurred _____ Last 4 digits of account number <u>7280</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit 916 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.470	Nonpriority creditor's name and mailing address W. Louis McDonald Date(s) debt was incurred _____ Last 4 digits of account number <u>7282</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 909 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.471	Nonpriority creditor's name and mailing address Glennis McElveen 820 King Ave. Florence Florence, SC 29501 Date(s) debt was incurred _____ Last 4 digits of account number <u>7283</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit 901 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.472	Nonpriority creditor's name and mailing address Mary McIntosh 8328 Orleans Blvd Union, KY 41091 Date(s) debt was incurred _____ Last 4 digits of account number <u>7284</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 918 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.473	Nonpriority creditor's name and mailing address Joseph McJunkins 19 Zinglstrasse St Montville, CT 06353 Date(s) debt was incurred _____ Last 4 digits of account number <u>7285</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 903 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.474	Nonpriority creditor's name and mailing address James McKenna 3 Chase Ln Sayville, NY 11782 Date(s) debt was incurred _____ Last 4 digits of account number <u>7286</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 1103 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.475	Nonpriority creditor's name and mailing address Terry McKinney 1736 Denver Rd Waverly, OH 45690 Date(s) debt was incurred _____ Last 4 digits of account number <u>7287</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 910 (Annual Float) Unit Type: 1BD; Unit: 919 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.476	Nonpriority creditor's name and mailing address Isaac McLaughlin 2532 Jeff St Charlotte, NC 28205 Date(s) debt was incurred _____ Last 4 digits of account number <u>7288</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 902 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.477	Nonpriority creditor's name and mailing address Kim McLaughlin 1146 Rainbow Ln Montvale, VA 24122 Date(s) debt was incurred _____ Last 4 digits of account number <u>7289</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 1103 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.478	Nonpriority creditor's name and mailing address Lee McLean 9807 Possum Hollow Rd Shippensburg, PA 17257 Date(s) debt was incurred ____ Last 4 digits of account number <u>7290</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 916 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.479	Nonpriority creditor's name and mailing address Grantham McNeill 240 Covington Rd Red Springs, NC 28377 Date(s) debt was incurred ____ Last 4 digits of account number <u>7292</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 902 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.480	Nonpriority creditor's name and mailing address Michael Means 4122 W Fork Ridge Dr Batavia, OH 45103 Date(s) debt was incurred ____ Last 4 digits of account number <u>7293</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 1114 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.481	Nonpriority creditor's name and mailing address Andrew Mears 205 Longview Dr Abingdon, VA 24211 Date(s) debt was incurred ____ Last 4 digits of account number <u>7294</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 916 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.482	Nonpriority creditor's name and mailing address Luz Mendez 1111 Village Green Dr Angola, IN 46703 Date(s) debt was incurred ____ Last 4 digits of account number <u>7296</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 920 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.483	Nonpriority creditor's name and mailing address Shelly Mercer-Jamison 30 Plains Road Hamden, CT 06514 Date(s) debt was incurred ____ Last 4 digits of account number <u>7297</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1BD; Unit: 918 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.484	Nonpriority creditor's name and mailing address Adam Merrell 11421 Iowa Cir Omaha, NE 68142 Date(s) debt was incurred _____ Last 4 digits of account number <u>7298</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 914 (Annual Float)</u> Unit Type: <u>1 BD; Unit: 915 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.485	Nonpriority creditor's name and mailing address Jonathan Merritt 152 Ashbury Park Lane Richlands, NC 28574 Date(s) debt was incurred _____ Last 4 digits of account number <u>7299</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 907 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.486	Nonpriority creditor's name and mailing address Thomas Meta 8840 State Highway 198 Conneautville, PA 16406 Date(s) debt was incurred _____ Last 4 digits of account number <u>7300</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 921 (Annual Float)</u> Unit Type: <u>STU; Unit: 910 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.487	Nonpriority creditor's name and mailing address MHS Associates, LLC PO Box 14178 Augusta, GA 30909 Date(s) debt was incurred _____ Last 4 digits of account number <u>7025</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 1116 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.488	Nonpriority creditor's name and mailing address Michael Rubino 4160 State Route 5 #8 Frankfort, NY 13340 Date(s) debt was incurred _____ Last 4 digits of account number <u>7473</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1BD; Unit 918 (Annual Float)</u> Unit Type: <u>STU; Unit 908 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.489	Nonpriority creditor's name and mailing address Paul Mier 10150 E. Harvard Ave Denver, CO 80231 Date(s) debt was incurred _____ Last 4 digits of account number <u>7301</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 909 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.490	Nonpriority creditor's name and mailing address Juanita Miles 3824 Rural St Rockford, IL 61107 Date(s) debt was incurred _____ Last 4 digits of account number <u>7302</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 918 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.491	Nonpriority creditor's name and mailing address DavidMiller 467 McDermott Pond Creek Rd Mc Dermott, OH 45652 Date(s) debt was incurred _____ Last 4 digits of account number <u>7303</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 901 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.492	Nonpriority creditor's name and mailing address DavidMiller 865 Crane Rd Danville, VA 24540 Date(s) debt was incurred _____ Last 4 digits of account number <u>7304</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 918 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.493	Nonpriority creditor's name and mailing address Dorothy Miller PO Box 364 High Shoals, NC 28077 Date(s) debt was incurred _____ Last 4 digits of account number <u>7305</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>OTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 917 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.494	Nonpriority creditor's name and mailing address Grover Miller 1921 Calks Ferry Rd Lexington, SC 29073 Date(s) debt was incurred _____ Last 4 digits of account number <u>7306</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 905 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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Name _____		
3.495	Nonpriority creditor's name and mailing address John Miller PO Box 392 Jamestown, PA 16134 Date(s) debt was incurred _____ Last 4 digits of account number <u>7307</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 901 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.496	Nonpriority creditor's name and mailing address Kimberly Miller 712 Midstreams Rd Brick, NJ 08724 Date(s) debt was incurred _____ Last 4 digits of account number <u>7308</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 1103 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.497	Nonpriority creditor's name and mailing address Mick Miller 539 Wildflower Trail Myrtle Beach, SC 29579 Date(s) debt was incurred _____ Last 4 digits of account number <u>7309</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 1103 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.498	Nonpriority creditor's name and mailing address Lyle Miller, Sr. PO Box 11185 Hickory, NC 28603 Date(s) debt was incurred _____ Last 4 digits of account number <u>0489</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit 907 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.499	Nonpriority creditor's name and mailing address Bill Mills 314 Curtis Drive Sumter, SC 29153 Date(s) debt was incurred _____ Last 4 digits of account number <u>7310</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit 1109 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.500	Nonpriority creditor's name and mailing address Morgan Mills PO Box 911 Stephens City, VA 22655 Date(s) debt was incurred _____ Last 4 digits of account number <u>7312</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit 902 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.501	Nonpriority creditor's name and mailing address Susie Mincey 1511 Marley Dr Columbia, SC 29210 Date(s) debt was incurred _____ Last 4 digits of account number <u>7313</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 1101 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.502	Nonpriority creditor's name and mailing address Jon-Paul Miron 7 Switzer Crest Binbrook, ON, L0R 1C0, Canada Date(s) debt was incurred _____ Last 4 digits of account number <u>7314</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 916 (Annual Points)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.503	Nonpriority creditor's name and mailing address Brent Mollette 7042 Tylerwood Ct Milton, FL 32570 Date(s) debt was incurred _____ Last 4 digits of account number <u>7316</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 1115 (Annual Float)</u> Unit Type: <u>STU; Unit 1114 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.504	Nonpriority creditor's name and mailing address Glenda Monroe 169 Julia T Rd Saint Pauls, NC 28384 Date(s) debt was incurred _____ Last 4 digits of account number <u>7318</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 916 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.505	Nonpriority creditor's name and mailing address Wayne Montague 3901 Turnberry Loop Seneca, SC 29678 Date(s) debt was incurred _____ Last 4 digits of account number <u>7319</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 903 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.506	Nonpriority creditor's name and mailing address Catherine Monte 6123 Woodridge Lane Grand Blanc, MI 48439 Date(s) debt was incurred _____ Last 4 digits of account number <u>7320</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 904 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Name	Case number (if known)
3.507	Nonpriority creditor's name and mailing address Jeffrey Mooney 4629 Brooklawn St Davidson, NC 28036 Date(s) debt was incurred ____ Last 4 digits of account number <u>7321</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 908 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.508	Nonpriority creditor's name and mailing address Terrence Mooney 1821 N Marshall Rd Middletown, OH 45042 Date(s) debt was incurred ____ Last 4 digits of account number <u>7322</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 911 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.509	Nonpriority creditor's name and mailing address Damitchell Moore 207 New Market St, Apt 7D Greenwood, SC 29646 Date(s) debt was incurred ____ Last 4 digits of account number <u>2082</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 1103 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.510	Nonpriority creditor's name and mailing address James Moore 529 Hunt St Ashland, KY 41101 Date(s) debt was incurred ____ Last 4 digits of account number <u>7326</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 906 (Biannual Float)</u> Unit Type: <u>1 BD; Unit: 917 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.511	Nonpriority creditor's name and mailing address Jimmy Moore 111 Melville Ct Mooreville, NC 28117 Date(s) debt was incurred ____ Last 4 digits of account number <u>7327</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 915 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.512	Nonpriority creditor's name and mailing address George Moore, Jr. PO Box 65 Swansboro, NC 28584 Date(s) debt was incurred ____ Last 4 digits of account number <u>7325</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 904 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.513	Nonpriority creditor's name and mailing address Theresa Moore 752 Village Lane Dr SW Marietta, GA 30060 Date(s) debt was incurred _____ Last 4 digits of account number <u>7328</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 912 (Annual Float)</u> Unit Type: <u>1 BD; Unit 917 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.514	Nonpriority creditor's name and mailing address David Moorman, Jr. 347 Hammitt Rd Bulls Gap, TN 37711 Date(s) debt was incurred _____ Last 4 digits of account number <u>7329</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 916 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.515	Nonpriority creditor's name and mailing address Annette Moosavi PO Box 1731 Davidson, NC 28036 Date(s) debt was incurred _____ Last 4 digits of account number <u>7330</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 906 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.516	Nonpriority creditor's name and mailing address Oswaldo Morales 245 Old Point Rd Milford, CT 06460 Date(s) debt was incurred _____ Last 4 digits of account number <u>7331</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 901 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.517	Nonpriority creditor's name and mailing address James Morgan 120 Country Club Drive Apt A Elmira, NY 14905-1913 Date(s) debt was incurred _____ Last 4 digits of account number <u>7332</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 908 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.518	Nonpriority creditor's name and mailing address Jean Morrison 3369 Dolphin Dr Blasdell, NY 14219 Date(s) debt was incurred _____ Last 4 digits of account number <u>7333</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 916 (Annual Float) Unit Type: STU; Unit: 905 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.519	Nonpriority creditor's name and mailing address Durland Mosher, II 603 Church St Athens, PA 18840 Date(s) debt was incurred _____ Last 4 digits of account number <u>7335</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit 906 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.520	Nonpriority creditor's name and mailing address Sandra Mosher 6270 Tudor Ln Loves Park, IL 61111 Date(s) debt was incurred _____ Last 4 digits of account number <u>7336</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 918 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.521	Nonpriority creditor's name and mailing address Randall Mueckl c/o Frederick & Rogers 1903 E Battlefield Springfield, MO 65804 Date(s) debt was incurred _____ Last 4 digits of account number <u>7337</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 901 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.522	Nonpriority creditor's name and mailing address John Mulder 26158 Shady Brook Trl Courtland, VA 23837 Date(s) debt was incurred _____ Last 4 digits of account number <u>7338</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 1115 (Annual Float) Unit Type: STU; Unit: 1114 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.523	Nonpriority creditor's name and mailing address Mamie Murphy 870 Vandenburg Dr Boiling Springs, SC 29316 Date(s) debt was incurred ____ Last 4 digits of account number <u>7339</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 1103 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.524	Nonpriority creditor's name and mailing address William Murphy 590 Long Branch Circle Williston, SC 29853 Date(s) debt was incurred ____ Last 4 digits of account number <u>7341</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 1116 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.525	Nonpriority creditor's name and mailing address Johnny Murray 3818 Wester Rd Raleigh, NC 27604 Date(s) debt was incurred ____ Last 4 digits of account number <u>7342</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 902 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.526	Nonpriority creditor's name and mailing address Johnston Murray 5444 Laurinburg Rd Raeford, NC 28376 Date(s) debt was incurred ____ Last 4 digits of account number <u>7152</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 905 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.527	Nonpriority creditor's name and mailing address Kimberly Murrell 9617 Rothman Ln Charlotte, NC 28215 Date(s) debt was incurred ____ Last 4 digits of account number <u>7343</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 905 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.528	Nonpriority creditor's name and mailing address Larry Mustain 4814 Lilydale Back Creek Rd Greenville, WV 24945 Date(s) debt was incurred ____ Last 4 digits of account number <u>7344</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 914 (Biannual Float)</u> Unit Type: <u>1 BD; Unit: 915 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.529	Nonpriority creditor's name and mailing address Terry Muth 770 Berkeley Ave NW Atlanta, GA 30318 Date(s) debt was incurred _____ Last 4 digits of account number <u>7345</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 905 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.530	Nonpriority creditor's name and mailing address James Muzeni 1768 W Herick Ct Hernando, FL 34442 Date(s) debt was incurred _____ Last 4 digits of account number <u>7346</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 907 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.531	Nonpriority creditor's name and mailing address James Myers 613 Village Green Ln Okatie, SC 29909 Date(s) debt was incurred _____ Last 4 digits of account number <u>7348</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 905 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.532	Nonpriority creditor's name and mailing address Thomas Myers 3455 Lakeshore Dr Florence, SC 29501 Date(s) debt was incurred _____ Last 4 digits of account number <u>7350</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 917 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.533	Nonpriority creditor's name and mailing address Anatoly Naritsin 6 Bobsled Dr Needham Heights, MA 02494 Date(s) debt was incurred _____ Last 4 digits of account number <u>7351</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 919 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.534	Nonpriority creditor's name and mailing address Larry Neal PO Box 178 Walkertown, NC 27051 Date(s) debt was incurred _____ Last 4 digits of account number <u>7352</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 906 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.535	Nonpriority creditor's name and mailing address Major Newkirk 1471 Register Rd Rose Hill, NC 28458 Date(s) debt was incurred _____ Last 4 digits of account number <u>7354</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 904 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.536	Nonpriority creditor's name and mailing address George Nicholas, Jr. 2108 Fittleworth Terrace Upper Marlboro, MD 20774 Date(s) debt was incurred _____ Last 4 digits of account number <u>7355</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 1114 (Annual Float)</u> Unit Type: <u>1 BD; Unit 1115 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.537	Nonpriority creditor's name and mailing address Jennifer Nixon 302 Walnut Drive Clifton Park, NY 12065 Date(s) debt was incurred _____ Last 4 digits of account number <u>9570</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 1116 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.538	Nonpriority creditor's name and mailing address Susan Noack 1105 Artic Quill Rd Herndon, VA 20170 Date(s) debt was incurred _____ Last 4 digits of account number <u>7358</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 919 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.539	Nonpriority creditor's name and mailing address L. Noblett 353 Eaglehead Pt East Rochester, NY 14445 Date(s) debt was incurred _____ Last 4 digits of account number <u>7359</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 901 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.540	Nonpriority creditor's name and mailing address Howard Norton c/o Bruce B. Briggs, Attorney at Law PO Box 81 Mars Hill, NC 28754 Date(s) debt was incurred _____ Last 4 digits of account number <u>7360</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 907 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known) _____
Name _____		
3.541	Nonpriority creditor's name and mailing address Cherlyn Nzongola PO Box 6112 Beaufort, SC 29903 Date(s) debt was incurred _____ Last 4 digits of account number <u>7361</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 908 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.542	Nonpriority creditor's name and mailing address Mary J. O'Neal PO Box 2082 Rockingham, NC 28380 Date(s) debt was incurred _____ Last 4 digits of account number <u>7362</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 904 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.543	Nonpriority creditor's name and mailing address O'Towers Wholesale, LLC 1777 S Burlington Blvd #213 Burlington, WA 98233 Date(s) debt was incurred _____ Last 4 digits of account number <u>7363</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 904 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.544	Nonpriority creditor's name and mailing address Lonnie Oakley, Jr. 207 Pinebrook School Rd Mocksville, NC 27028 Date(s) debt was incurred _____ Last 4 digits of account number <u>7364</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 919 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.545	Nonpriority creditor's name and mailing address Onwardo LLC PO Box 190 Waunakee, WI 53597 Date(s) debt was incurred _____ Last 4 digits of account number <u>5649</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 916 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.546	Nonpriority creditor's name and mailing address Justin Ooten PO Box 1012 Holden, WV 25625 Date(s) debt was incurred _____ Last 4 digits of account number <u>7367</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 908 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known) _____
Name _____		
3.547	Nonpriority creditor's name and mailing address Orlando Trust, dated January 6812 Championship Dr Whitsett, NC 27377 Date(s) debt was incurred _____ Last 4 digits of account number <u>7368</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 906 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.548	Nonpriority creditor's name and mailing address Bobbie Owens 1569 S Crescent Heights Blvd Los Angeles, CA 90035 Date(s) debt was incurred _____ Last 4 digits of account number <u>7370</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 915 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.549	Nonpriority creditor's name and mailing address Kyleen Oxendine 19892 Lucky Ln Waynesville, MO 65583 Date(s) debt was incurred _____ Last 4 digits of account number <u>7372</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 1117 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.550	Nonpriority creditor's name and mailing address Thomas Palmer, Jr. PO Box 1236 Byron, GA 31008 Date(s) debt was incurred _____ Last 4 digits of account number <u>0829</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 904 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.551	Nonpriority creditor's name and mailing address Dante Palmer, Sr. 2430 Orchard Dr Hephzibah, GA 30815 Date(s) debt was incurred _____ Last 4 digits of account number <u>7373</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 901 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.552	Nonpriority creditor's name and mailing address Ellis Pardue 1244 Arbor Rd Box 134 Winston Salem, NC 27104 Date(s) debt was incurred _____ Last 4 digits of account number <u>7375</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 903 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known) _____
Name _____		
3.553	Nonpriority creditor's name and mailing address Murrine Parra 7742 Henry Harris Road Fort Mill, SC 29707 Date(s) debt was incurred _____ Last 4 digits of account number <u>7377</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 907 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.554	Nonpriority creditor's name and mailing address Billy Joe Parrish PSC 567 Box 6842 FPO, AP 96384 Date(s) debt was incurred _____ Last 4 digits of account number <u>7378</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 919 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.555	Nonpriority creditor's name and mailing address Vincent Passalacqua 41 Edgewood Ter Bridgewater, NJ 08807 Date(s) debt was incurred _____ Last 4 digits of account number <u>7379</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 903 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.556	Nonpriority creditor's name and mailing address Allison Patrick 161 Beaver Creek Dr Chesnee, SC 29323 Date(s) debt was incurred _____ Last 4 digits of account number <u>7380</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 905 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.557	Nonpriority creditor's name and mailing address Charles Patrick 194 Oliver St North Wilkesboro, NC 28659 Date(s) debt was incurred _____ Last 4 digits of account number <u>7381</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 902 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.558	Nonpriority creditor's name and mailing address Vivian Patrick 519 Sandpiper Cir Cheraw, SC 29520 Date(s) debt was incurred _____ Last 4 digits of account number <u>7382</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 916 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known) _____
Name _____		
3.559	Nonpriority creditor's name and mailing address Kenny Patterson c/o Frederick & Rogers 1903 E. Battlefield Rd Springfield, MO 65804 Date(s) debt was incurred _____ Last 4 digits of account number <u>7384</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 914 (Biannual Float)</u> Unit Type: <u>1 BD; Unit: 915 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.560	Nonpriority creditor's name and mailing address Randy Patterson 860 Sleepy Hollow Rd Midland, NC 28107 Date(s) debt was incurred _____ Last 4 digits of account number <u>7385</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 902 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.561	Nonpriority creditor's name and mailing address Savonita Peeler 215 Lockhart Ln Gaffney, SC 29341 Date(s) debt was incurred _____ Last 4 digits of account number <u>7387</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 903 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.562	Nonpriority creditor's name and mailing address Howard Pelton, III 2862 Red Fox Run Dr NW Warren, OH 44485 Date(s) debt was incurred _____ Last 4 digits of account number <u>7388</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 916 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.563	Nonpriority creditor's name and mailing address Mark Pennington 109 Lm Porter Cemetery Rd Sandy Hook, KY 41171 Date(s) debt was incurred _____ Last 4 digits of account number <u>7389</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 1114 (Annual Float)</u> Unit Type: <u>1 BD; Unit: 1115 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known) _____
Name _____		
3.564	Nonpriority creditor's name and mailing address Kevin Penny 216 Tallstone Dr Fayetteville, NC 28306 Date(s) debt was incurred _____ Last 4 digits of account number <u>7390</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1BD; Unit: 1117 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.565	Nonpriority creditor's name and mailing address Warren Perkins 1308 Pinehurst St Gastonia, NC 28052 Date(s) debt was incurred _____ Last 4 digits of account number <u>7391</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 906 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.566	Nonpriority creditor's name and mailing address Kenneth Person 8580 Highway 265 Mount Croghan, SC 29727 Date(s) debt was incurred _____ Last 4 digits of account number <u>7392</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1BD; Unit: 916 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.567	Nonpriority creditor's name and mailing address Michelle Peters 6393 Blossomwood Cir NE N Canton, OH 44721 Date(s) debt was incurred _____ Last 4 digits of account number <u>7393</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit 1114 (Biannual Float) Unit Type: 1 BD; Unit 1115 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.568	Nonpriority creditor's name and mailing address George Petitt, III 25 Scout Rd Greenville, SC 29611 Date(s) debt was incurred _____ Last 4 digits of account number <u>7394</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit 1105 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.569	Nonpriority creditor's name and mailing address Petrus Vacation Rentals, LLC 1835 E Hallandale Beach Blvd #626 Hallandale, FL 33009 Date(s) debt was incurred _____ Last 4 digits of account number <u>7396</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit 901 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.570	Nonpriority creditor's name and mailing address Nicole Petrus 24A Trolley Sq #171 Wilmington, DE 19806 Date(s) debt was incurred _____ Last 4 digits of account number <u>7395</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 910 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.571	Nonpriority creditor's name and mailing address Andrew Pfefferkorn, Jr. 12574 Garry Glen Drive Bristow, VA 20136 Date(s) debt was incurred _____ Last 4 digits of account number <u>7397</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 1103 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.572	Nonpriority creditor's name and mailing address Andrea Phillips PO Box 939 Whitakers, NC 27891 Date(s) debt was incurred _____ Last 4 digits of account number <u>7398</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1BD; Unit: 1116 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.573	Nonpriority creditor's name and mailing address Charles Phillips 109 Robinson Clemmer Rd Dallas, NC 28034 Date(s) debt was incurred _____ Last 4 digits of account number <u>7399</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 906 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.574	Nonpriority creditor's name and mailing address James Phillips, III 4040 Landover Peak Place Raleigh, NC 27616 Date(s) debt was incurred _____ Last 4 digits of account number <u>7400</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 1115 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.575	Nonpriority creditor's name and mailing address Cecil Piansay 1104 Keystone Dr Asheboro, NC 27203 Date(s) debt was incurred _____ Last 4 digits of account number <u>7401</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 902 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.576	Nonpriority creditor's name and mailing address Anthony Pickhinke 7835 E Burro Dr Kingman, AZ 86401 Date(s) debt was incurred ____ Last 4 digits of account number <u>7402</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 905 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.577	Nonpriority creditor's name and mailing address Laymon Pickle 272 Pickle Hollow Rd Saltville, VA 24370 Date(s) debt was incurred ____ Last 4 digits of account number <u>7403</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 916 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.578	Nonpriority creditor's name and mailing address Sheila Pierce 5330 Hames Trace Louisville, KY 40291 Date(s) debt was incurred ____ Last 4 digits of account number <u>7404</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 905 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.579	Nonpriority creditor's name and mailing address Elton Pierson 140 Gigi Ln Loudon, TN 37774 Date(s) debt was incurred ____ Last 4 digits of account number <u>7405</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 903 (Biennial Points)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.580	Nonpriority creditor's name and mailing address Natalie Pitman 400 Summit Drive Apt 3C Greenville, SC 29609-4854 Date(s) debt was incurred ____ Last 4 digits of account number <u>6974</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1BD; Unit 916 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.581	Nonpriority creditor's name and mailing address Janice Polesky 626 Cherry Lane Royalton, MN 56373 Date(s) debt was incurred ____ Last 4 digits of account number <u>7407</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 914 (Biannual Float)</u> Unit Type: <u>1 BD; Unit: 915 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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Name _____		
3.582	Nonpriority creditor's name and mailing address Anthony Pompey PO Box 641 Kingstree, SC 29556 Date(s) debt was incurred _____ Last 4 digits of account number <u>7408</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1BD; Unit: 918 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.583	Nonpriority creditor's name and mailing address Bronna Poole PO Box 821 Randleman, NC 27317 Date(s) debt was incurred _____ Last 4 digits of account number <u>7409</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: S1BD; Unit: 919 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.584	Nonpriority creditor's name and mailing address L. Norton Pope 4246 Estate Drive Conway, SC 29526 Date(s) debt was incurred _____ Last 4 digits of account number <u>2401</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit 904 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.585	Nonpriority creditor's name and mailing address Rosemary Pope 414 Ash Circle Elkhart, IN 46517 Date(s) debt was incurred _____ Last 4 digits of account number <u>7410</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 902 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.586	Nonpriority creditor's name and mailing address Paul Porfeli 32306 Hugh Road Apt A Albemarle, NC 28001-7376 Date(s) debt was incurred _____ Last 4 digits of account number <u>7411</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit 1106 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.587	Nonpriority creditor's name and mailing address Mark Porter 5656 Springlake Road Canton, OH 44718-1154 Date(s) debt was incurred _____ Last 4 digits of account number <u>7412</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1BD; Unit: 916 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.588	Nonpriority creditor's name and mailing address Jabez Powell 3804 Peppercorn Ln Greensboro, NC 27406 Date(s) debt was incurred _____ Last 4 digits of account number <u>7413</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 903 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.589	Nonpriority creditor's name and mailing address Ricquel Pratt 7042 Brandemere Lane (CR) Apt J Winston Salem, NC 27106 Date(s) debt was incurred _____ Last 4 digits of account number <u>7414</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 902 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.590	Nonpriority creditor's name and mailing address Susan Preston 3910 West Bent Grass Dr. Fayetteville, NC 28312 Date(s) debt was incurred _____ Last 4 digits of account number <u>7416</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 903 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.591	Nonpriority creditor's name and mailing address Willie Preston 20024 Halloway Ave Matoaca, VA 23803 Date(s) debt was incurred _____ Last 4 digits of account number <u>7417</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 903 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.592	Nonpriority creditor's name and mailing address David Price 23 Harbour Heights Drive Annapolis, MD 21401 Date(s) debt was incurred _____ Last 4 digits of account number <u>7418</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 1116 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.593	Nonpriority creditor's name and mailing address Veva Prichard 299 River Road PO Box 299 Crum, WV 25669 Date(s) debt was incurred _____ Last 4 digits of account number <u>1898</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 906 (Annual Float)</u> Unit Type: <u>1 BD; Unit 918 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.594	Nonpriority creditor's name and mailing address Christopher Pridmore 1301 Cove Creek Rd Pickens, SC 29671 Date(s) debt was incurred _____ Last 4 digits of account number <u>7419</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 906 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.595	Nonpriority creditor's name and mailing address Carlette Priester 6449 Caymus Dr Charlotte, NC 28269 Date(s) debt was incurred _____ Last 4 digits of account number <u>7420</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 916 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.596	Nonpriority creditor's name and mailing address Mary Prouty 3910 Doster Rd Monroe, NC 28112 Date(s) debt was incurred _____ Last 4 digits of account number <u>7421</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 1101 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.597	Nonpriority creditor's name and mailing address Haughton Purser 4312 Ryegate Dr Raleigh, NC 27604 Date(s) debt was incurred _____ Last 4 digits of account number <u>7422</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 908 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.598	Nonpriority creditor's name and mailing address Wesley Pursiful 7987 Longmire Rd Luttrell, TN 37779 Date(s) debt was incurred _____ Last 4 digits of account number <u>7423</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 906 (Annual Float)</u> Unit Type: <u>1 BD; Unit: 918 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.599	Nonpriority creditor's name and mailing address Thomas Pytko 94 E Acres Ave Pittsfield, MA 01201 Date(s) debt was incurred _____ Last 4 digits of account number <u>7424</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 1111 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.600	Nonpriority creditor's name and mailing address Linda Radcliffe 110 Crescent Ave Woodbury, NJ 08096 Date(s) debt was incurred _____ Last 4 digits of account number <u>7562</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 903 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.601	Nonpriority creditor's name and mailing address Marcia Ragin 2850 September Dr Sumter, SC 29154 Date(s) debt was incurred _____ Last 4 digits of account number <u>7425</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 903 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.602	Nonpriority creditor's name and mailing address Francis Ralston 9009 Morton Ave Brooklyn, OH 44144 Date(s) debt was incurred _____ Last 4 digits of account number <u>7427</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1BD; Unit: 920 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.603	Nonpriority creditor's name and mailing address Chad G. Ramsey 172 Joseph Alexander Dr Fuquay Varina, NC 27526 Date(s) debt was incurred _____ Last 4 digits of account number <u>7428</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 918 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.604	Nonpriority creditor's name and mailing address Richard Ranson 214 Greenway St Huntersville, NC 28078 Date(s) debt was incurred _____ Last 4 digits of account number <u>7430</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 916 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.605	Nonpriority creditor's name and mailing address Joseph Ratliff 2916 Whippowill Cir Augusta, GA 30906 Date(s) debt was incurred _____ Last 4 digits of account number <u>7431</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 908 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.606	Nonpriority creditor's name and mailing address Myron Ravenel PO Box 41961 North Charleston, SC 29418 Date(s) debt was incurred _____ Last 4 digits of account number <u>7432</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit 901 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.607	Nonpriority creditor's name and mailing address Morris Reid, III 924 Hunt Club Run Charleston, SC 29414 Date(s) debt was incurred _____ Last 4 digits of account number <u>7435</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 901 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.608	Nonpriority creditor's name and mailing address Joseph Reinhardt PO Box 621 Chesapeake, OH 45619 Date(s) debt was incurred _____ Last 4 digits of account number <u>7436</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 1110 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.609	Nonpriority creditor's name and mailing address Timothy Reinke, Sr. 25944 Mackinac St. Roseville, MI 48066 Date(s) debt was incurred _____ Last 4 digits of account number <u>7437</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1BD; Unit: 1115 (Annual Float) Unit Type: STU; Unit 1114 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.610	Nonpriority creditor's name and mailing address Resort Travel and Xchange, Inc. One Vance Gap Road Asheville, NC 28805 Date(s) debt was incurred <u>As of January 31, 2019</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,033.33</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.611	Nonpriority creditor's name and mailing address James Respus 103 King Richard Court Red Springs, NC 28377-1261 Date(s) debt was incurred _____ Last 4 digits of account number <u>7438</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 909 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.612	Nonpriority creditor's name and mailing address Dutch Reuschel 1817 Hopewell Dr Elverson, PA 19520 Date(s) debt was incurred _____ Last 4 digits of account number <u>7440</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 901 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.613	Nonpriority creditor's name and mailing address Carlos Reynolds 3018 Tiffin Cir Macon, GA 31204 Date(s) debt was incurred _____ Last 4 digits of account number <u>7441</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 901 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.614	Nonpriority creditor's name and mailing address Frederick Rhew c/o Robert Jones, Attorney at Law 732 Thimble Shoals Blvd, Suite 901 Newport News, VA 23606 Date(s) debt was incurred _____ Last 4 digits of account number <u>7442</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 903 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.615	Nonpriority creditor's name and mailing address Bobby Rhodes 415 W Hortter St Philadelphia, PA 19119 Date(s) debt was incurred _____ Last 4 digits of account number <u>7443</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 916 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.616	Nonpriority creditor's name and mailing address Geoffrey Rhodes 7112 Indian Ridge Ln Charlotte, NC 28214 Date(s) debt was incurred _____ Last 4 digits of account number <u>7444</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 916 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.617	Nonpriority creditor's name and mailing address Georgia Rhodes PO Box 424 Waynesboro, GA 30830 Date(s) debt was incurred _____ Last 4 digits of account number <u>7445</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 901 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.618	Nonpriority creditor's name and mailing address Laura Richards 1510 Callaway Loop Conyers, GA 30012 Date(s) debt was incurred _____ Last 4 digits of account number <u>7446</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 911 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.619	Nonpriority creditor's name and mailing address David Richardson 700 Coventry Ln Florence, SC 29501 Date(s) debt was incurred _____ Last 4 digits of account number <u>7447</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 1101 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.620	Nonpriority creditor's name and mailing address Taji Richardson 215 Ridge Bay Ct Greenville, SC 29611 Date(s) debt was incurred _____ Last 4 digits of account number <u>7450</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 907 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.621	Nonpriority creditor's name and mailing address Nicholas Richer 208 Ferry St Abbeville, SC 29620 Date(s) debt was incurred _____ Last 4 digits of account number <u>7451</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 918 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.622	Nonpriority creditor's name and mailing address Chris Risby 7006 Commander Howe Ter Brandywine, MD 20613 Date(s) debt was incurred _____ Last 4 digits of account number <u>7453</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 1112 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.623	Nonpriority creditor's name and mailing address Eric Rivera 29 Greenfield Ave Staten Island, NY 10304 Date(s) debt was incurred _____ Last 4 digits of account number <u>7454</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 916 (Annual Points)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.624	Nonpriority creditor's name and mailing address Christopher Roach 10940 213th St Queens Village, NY 11429 Date(s) debt was incurred _____ Last 4 digits of account number <u>7456</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 908 (Annual Float)</u> Unit Type: <u>1BD; Unit 916 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.625	Nonpriority creditor's name and mailing address Guy Robbs 19087 Highway 221 N Laurens, SC 29360 Date(s) debt was incurred _____ Last 4 digits of account number <u>7457</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 904 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.626	Nonpriority creditor's name and mailing address Arther Roberson, Sr. 120 Carolina Ridge Dr Columbia, SC 29229 Date(s) debt was incurred _____ Last 4 digits of account number <u>7458</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 901 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.627	Nonpriority creditor's name and mailing address Archie Robertson 1016 Alston Hill Dr Charlotte, NC 28214 Date(s) debt was incurred _____ Last 4 digits of account number <u>7459</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 1105 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.628	Nonpriority creditor's name and mailing address Kenneth Robertson 3326 Venus Dr Durham, NC 27703 Date(s) debt was incurred _____ Last 4 digits of account number <u>7462</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 907 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.629	Nonpriority creditor's name and mailing address Katrina Robinson 4 Rockport Court Greensboro, NC 27406-8773 Date(s) debt was incurred _____ Last 4 digits of account number <u>7463</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1BD; Unit 917 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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Name _____		
3.630	Nonpriority creditor's name and mailing address Joyce Robinson-Bell 205 Kindlewood Dr Durham, NC 27703 Date(s) debt was incurred _____ Last 4 digits of account number <u>6761</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 903 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.631	Nonpriority creditor's name and mailing address Charla Roby 2912 Martinsville Rd Greensboro, NC 27408 Date(s) debt was incurred _____ Last 4 digits of account number <u>7466</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 918 (Annual Float) Unit Type: 1 BD; Unit: 920 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.632	Nonpriority creditor's name and mailing address Kathryn Rogers c/o Randy Rogers, PR of Estate 505 Tyre B Mauldin St Walhalla, SC 29691 Date(s) debt was incurred _____ Last 4 digits of account number <u>7648</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit 901 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.633	Nonpriority creditor's name and mailing address Daniel Root 7421 Matherly Drive Wake Forest, NC 27587 Date(s) debt was incurred _____ Last 4 digits of account number <u>7468</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit 904 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.634	Nonpriority creditor's name and mailing address Elton Ross 220 Reaves St Raeford, NC 28376 Date(s) debt was incurred _____ Last 4 digits of account number <u>7471</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit 905 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.635	Nonpriority creditor's name and mailing address Michael Rubino 4160 State Route 5, #8 Frankfort, NY 13340 Date(s) debt was incurred _____ Last 4 digits of account number <u>7473</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 908 (Annual Float)</u> Unit Type: <u>1 BD; Unit 918 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.636	Nonpriority creditor's name and mailing address Russell Runion 4561 Follansbee Rd Winston Salem, NC 27127 Date(s) debt was incurred _____ Last 4 digits of account number <u>7474</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 902 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.637	Nonpriority creditor's name and mailing address James Russell 1261 Riveroaks Dr Colonial Heights, VA 23834 Date(s) debt was incurred _____ Last 4 digits of account number <u>7475</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 914 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.638	Nonpriority creditor's name and mailing address Michael Russo 428 Stonecrest Lane Gaffney, SC 29341-3446 Date(s) debt was incurred _____ Last 4 digits of account number <u>7476</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1BD; Unit 916 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.639	Nonpriority creditor's name and mailing address Bernadine Sampson 727 Shoreline Cir Schaumburg, IL 60194 Date(s) debt was incurred _____ Last 4 digits of account number <u>7477</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 902 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.640	Nonpriority creditor's name and mailing address Cleveland Samuels 1270 Nugget Drive GA 30891-3000 Date(s) debt was incurred _____ Last 4 digits of account number <u>7478</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1BD; Unit 908 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Name	Case number (if known)
3.641	Nonpriority creditor's name and mailing address Sand Castle South HOA Inc. c/o Alley Management Inc. 7400 N. Kings Highway Myrtle Beach, SC 29572 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$130,934.69 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Master Association Dues Owed</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.642	Nonpriority creditor's name and mailing address Jane Sander 15705 Ibisridge Drive Lithia, FL 33547 Date(s) debt was incurred ____ Last 4 digits of account number <u>7480</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: 1 BD; Unit: 1115 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.643	Nonpriority creditor's name and mailing address Davey Sanderson 712 Iva Ln Knoxville, TN 37918 Date(s) debt was incurred ____ Last 4 digits of account number <u>7481</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: 1 BD; Unit: 920 (Annual Float)</u> <u>Unit Type: 1 BD; Unit: 919 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.644	Nonpriority creditor's name and mailing address Nikolay Sandul PO Box 188 Kleinfeltersville, PA 17039 Date(s) debt was incurred ____ Last 4 digits of account number <u>7482</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: 1 BD; Unit: 920 (Annual Float)</u> <u>Unit Type: 1 BD; Unit: 921 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.645	Nonpriority creditor's name and mailing address Timothy Sargeant 8803 Cross Chase Cir Fairfax Station, VA 22039 Date(s) debt was incurred ____ Last 4 digits of account number <u>7483</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: STU; Unit: 906 (Annual Float)</u> <u>Unit Type: 1 BD; Unit: 918 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.646	Nonpriority creditor's name and mailing address Jeffrey T. Sargent 515 Wexford Hollow Run Roswell, GA 30075 Date(s) debt was incurred ____ Last 4 digits of account number <u>7484</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: 1 BD; Unit: 917 (Annual Points)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.647	Nonpriority creditor's name and mailing address Jon Sarlea 6626 Parrish Ave Hammond, IN 46323 Date(s) debt was incurred _____ Last 4 digits of account number <u>7485</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 901 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.648	Nonpriority creditor's name and mailing address Anthony Saunders 5936 Kentuck Rd Ringgold, VA 24586 Date(s) debt was incurred _____ Last 4 digits of account number <u>7487</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 910 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.649	Nonpriority creditor's name and mailing address Alfred Saylor 1151 Langley Blvd. Clawson, MI 48017 Date(s) debt was incurred _____ Last 4 digits of account number <u>7489</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 902 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.650	Nonpriority creditor's name and mailing address Veronica Scales 2009 E 18th St Winston Salem, NC 27105 Date(s) debt was incurred _____ Last 4 digits of account number <u>7490</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 905 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.651	Nonpriority creditor's name and mailing address Albert Schaefer PO Box 4585 Florence, SC 29502 Date(s) debt was incurred _____ Last 4 digits of account number <u>7491</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 914 (Annual Float)</u> Unit Type: <u>1 BD; Unit 919 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.652	Nonpriority creditor's name and mailing address John Schaub 13 Deveau Ct West Columbia, SC 29172 Date(s) debt was incurred _____ Last 4 digits of account number <u>7492</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 916 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.653	Nonpriority creditor's name and mailing address Jonathon Schlax 1502 Cassandra Dr Durham, NC 27712 Date(s) debt was incurred _____ Last 4 digits of account number <u>7493</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 903 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.654	Nonpriority creditor's name and mailing address David Schmidt PO Box 340 Clearwater, SC 29822 Date(s) debt was incurred _____ Last 4 digits of account number <u>7494</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 902 (Annual Points)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.655	Nonpriority creditor's name and mailing address Chelsea Schrader 334 Dellwater Lane Bedford, PA 15522 Date(s) debt was incurred _____ Last 4 digits of account number <u>5715</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 919 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.656	Nonpriority creditor's name and mailing address Eric Scott 90 Pewter Ln Stafford, VA 22554 Date(s) debt was incurred _____ Last 4 digits of account number <u>7497</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 904 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.657	Nonpriority creditor's name and mailing address Scott Shaffer 51 Keefer Way Mechanicsburg, PA 17055 Date(s) debt was incurred _____ Last 4 digits of account number <u>6989</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 919 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.658	Nonpriority creditor's name and mailing address Germari Sharper 416 E Tierra Dr. Florence, SC 29505 Date(s) debt was incurred _____ Last 4 digits of account number <u>7500</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 903 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.659	Nonpriority creditor's name and mailing address David Shaw 7 Wildewood Downs Pt Columbia, SC 29223 Date(s) debt was incurred _____ Last 4 digits of account number <u>7501</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 914 (Biannual Float) Unit Type: 1BR; Unit: 915 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.660	Nonpriority creditor's name and mailing address Phillip Shaw 317 Snider St High Point, NC 27265 Date(s) debt was incurred _____ Last 4 digits of account number <u>7502</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit 1101 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.661	Nonpriority creditor's name and mailing address Timothy Shaw 4 Filly Trl Fairfield, PA 17320 Date(s) debt was incurred _____ Last 4 digits of account number <u>7503</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 906 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.662	Nonpriority creditor's name and mailing address Chad Shealy 1989 Dr Bowers Road Little Mountain, SC 29075 Date(s) debt was incurred _____ Last 4 digits of account number <u>7504</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit 903 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.663	Nonpriority creditor's name and mailing address Harrison Shell 1401 Altama Dr Raleigh, NC 27610 Date(s) debt was incurred _____ Last 4 digits of account number <u>7506</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 902 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.664	Nonpriority creditor's name and mailing address Brian Shelley 302 Maple Avenue Horse Cave, KY 42749 Date(s) debt was incurred _____ Last 4 digits of account number <u>7508</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 910 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.665	Nonpriority creditor's name and mailing address Joanne Sher 24 Amaron Ln Staten Island, NY 10307 Date(s) debt was incurred _____ Last 4 digits of account number <u>7509</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 1101 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.666	Nonpriority creditor's name and mailing address Sherry Williams Gee 163 Highgrove Court Raeford, NC Date(s) debt was incurred _____ Last 4 digits of account number <u>7025</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 903 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.667	Nonpriority creditor's name and mailing address Joshua Shirley 9853 Friendship 7 El Paso, TX 79924 Date(s) debt was incurred _____ Last 4 digits of account number <u>7510</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 1120 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.668	Nonpriority creditor's name and mailing address Jessica Short 90 Oak Ln Berwyn, PA 19355 Date(s) debt was incurred _____ Last 4 digits of account number <u>7511</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 906 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.669	Nonpriority creditor's name and mailing address Leslie Shultz 580 Lakeview Dr Elkview, WV 25071 Date(s) debt was incurred _____ Last 4 digits of account number <u>7512</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 1103 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.670	Nonpriority creditor's name and mailing address Denis Silcock 383 Main Street E Apatment 413 Milton, OH L9T 8K8, Canada Date(s) debt was incurred _____ Last 4 digits of account number <u>7513</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 920 (Annual Float)</u> Unit Type: <u>1 BD; Unit: 919 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.671	Nonpriority creditor's name and mailing address Dwayne Simmons 61 E 2nd St Mount Vernon, NY 10550 Date(s) debt was incurred ____ Last 4 digits of account number <u>7514</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: STU; Unit: 906 (Annual Float)</u> <u>Unit Type: 1 BD; Unit: 918 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			<u>\$0.00</u>
3.672	Nonpriority creditor's name and mailing address Connie Slade 511 Hodges Dairy Rd Yanceyville, NC 27379 Date(s) debt was incurred ____ Last 4 digits of account number <u>7516</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: STU; Unit: 914 (Biannual Float)</u> <u>Unit Type: 1 BD; Unit: 915 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			<u>\$0.00</u>
3.673	Nonpriority creditor's name and mailing address William Slaughter 1727 Parham Drive Graham, NC 27253 Date(s) debt was incurred ____ Last 4 digits of account number <u>7517</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: 1BD; Unit: 918 (Annual Float)</u> <u>Unit Type: 1BD; Unit: 917 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			<u>\$0.00</u>
3.674	Nonpriority creditor's name and mailing address Anthony Smith 4304 John Gardner Rd Kershaw, SC 29067 Date(s) debt was incurred ____ Last 4 digits of account number <u>7520</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: 1 BD; Unit: 921 (Biannual Float)</u> <u>Unit Type: STU; Unit: 909 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			<u>\$0.00</u>
3.675	Nonpriority creditor's name and mailing address Carla Smith 449 Dorley Rd Spartanburg, SC 29307 Date(s) debt was incurred ____ Last 4 digits of account number <u>7521</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: STU; Unit: 909 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			<u>\$0.00</u>

Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known) _____
Name _____		
3.676	Nonpriority creditor's name and mailing address Charles Smith 104 Cotton Rd Shelby, NC 28150 Date(s) debt was incurred _____ Last 4 digits of account number <u>7522</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 902 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.677	Nonpriority creditor's name and mailing address Dorothy J. Smith 4538 Bellingham Ct Evans, GA 30809 Date(s) debt was incurred _____ Last 4 digits of account number <u>7524</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 920 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.678	Nonpriority creditor's name and mailing address Edwin Smith 116 Winthrop Way Jacksonville, NC 28546 Date(s) debt was incurred _____ Last 4 digits of account number <u>7525</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit 904 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.679	Nonpriority creditor's name and mailing address Gordon Smith P.O. Box 395 Kitscoty, AB, T0B 2P0, Canada Date(s) debt was incurred _____ Last 4 digits of account number <u>7526</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 1116 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.680	Nonpriority creditor's name and mailing address James Smith, Jr. 744 Douglas Road Gray Court, SC 29645 Date(s) debt was incurred _____ Last 4 digits of account number <u>7527</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit 1114 (Biannual Float) Unit Type: 1BD; Unit 1115 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known) _____
Name _____		
3.681	Nonpriority creditor's name and mailing address Kenneth Smith 455 Sells Road Bluff City, TN 37618 Date(s) debt was incurred _____ Last 4 digits of account number <u>7528</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1BD; Unit 917 (Annual Float)</u> Unit Type: <u>STU; Unit 909 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.682	Nonpriority creditor's name and mailing address Sharron Smith 3815 Atlas Drive Charlotte, NC 28269 Date(s) debt was incurred _____ Last 4 digits of account number <u>7529</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 902 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.683	Nonpriority creditor's name and mailing address Stacey Smith 2514 Edfeldt Dr District Heights, MD 20747 Date(s) debt was incurred _____ Last 4 digits of account number <u>7530</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 918 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.684	Nonpriority creditor's name and mailing address Stephanie Smith 5606 Birch Rd Fayetteville, NC 28304 Date(s) debt was incurred _____ Last 4 digits of account number <u>0490</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 902 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.685	Nonpriority creditor's name and mailing address Steven Smith 303 Conley St Greenville, NC 27834 Date(s) debt was incurred _____ Last 4 digits of account number <u>7531</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 916 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.686	Nonpriority creditor's name and mailing address Van Smith 3088 Youngs Park Dr Westville, SC 29175 Date(s) debt was incurred _____ Last 4 digits of account number <u>7532</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 1119 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known) _____
Name _____		
3.687	Nonpriority creditor's name and mailing address Henry Smoke, III 7825 Ginger Ln Charleston, SC 29420 Date(s) debt was incurred _____ Last 4 digits of account number <u>7533</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit 915 (Biannual Float) Unit Type: STU; Unit 914 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.688	Nonpriority creditor's name and mailing address Nicky J. Smyre 2407 33rd Ave NE Hickory, NC 28601 Date(s) debt was incurred _____ Last 4 digits of account number <u>7534</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 907 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.689	Nonpriority creditor's name and mailing address Alan Sneed PO Box 523 Black Mountain, NC 28711 Date(s) debt was incurred _____ Last 4 digits of account number <u>7535</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit 1101 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.690	Nonpriority creditor's name and mailing address Christopher Snider 2224 Old Farmer Rd Asheboro, NC 27205 Date(s) debt was incurred _____ Last 4 digits of account number <u>7536</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 904 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.691	Nonpriority creditor's name and mailing address Wayne Snow 782 Pembroke Way Charles Town, WV 25414 Date(s) debt was incurred _____ Last 4 digits of account number <u>7537</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit 1116 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.692	Nonpriority creditor's name and mailing address Robert Solomon, Jr. 8023 Old Philadelphia Rd Baltimore, MD 21237 Date(s) debt was incurred _____ Last 4 digits of account number <u>7539</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 907 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known) _____
Name _____		
3.693	Nonpriority creditor's name and mailing address Terrace Solomon 25 Vineland Lane Coatesville, PA 19320 Date(s) debt was incurred _____ Last 4 digits of account number <u>7540</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 914 (Annual Float)</u> Unit Type: <u>1BD; Unit 915 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.694	Nonpriority creditor's name and mailing address David Sosa 2538 Lillington Hwy Spring Lake, NC 28390-1848 Date(s) debt was incurred _____ Last 4 digits of account number <u>7542</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 1114 (Biannual Float)</u> Unit Type: <u>1BD; Unit 1115 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.695	Nonpriority creditor's name and mailing address Andrew Southerland 513 E Pollock St Mount Olive, NC 28365 Date(s) debt was incurred _____ Last 4 digits of account number <u>7543</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 911 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.696	Nonpriority creditor's name and mailing address Charles Sparwasser 7872 Saint Fabian Ln Dundalk, MD 21222 Date(s) debt was incurred _____ Last 4 digits of account number <u>7544</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 904 (Biennial Points)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.697	Nonpriority creditor's name and mailing address John Spears 4072 Banbridge Drive High Point, NC 27260 Date(s) debt was incurred _____ Last 4 digits of account number <u>7545</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 901 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Sand Castle South Timeshare Owners Association, Inc. <small>Name</small>	Case number (if known) _____
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3.698	Nonpriority creditor's name and mailing address Spencer Boose 9787 Old Mill Road Leland, NC 28451 Date(s) debt was incurred _____ Last 4 digits of account number <u>6787</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 912 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.699	Nonpriority creditor's name and mailing address Nora Squires 7221 S Kipling Pl Painesville, OH 44077 Date(s) debt was incurred _____ Last 4 digits of account number <u>7547</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 1121 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.700	Nonpriority creditor's name and mailing address Joyce Stallings 3885 Tower Hill Road Kinston, NC 28501 Date(s) debt was incurred _____ Last 4 digits of account number <u>7548</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 907 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.701	Nonpriority creditor's name and mailing address Margaret Steed 120 E Watkins St Augusta, GA 30901 Date(s) debt was incurred _____ Last 4 digits of account number <u>7550</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 916 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.702	Nonpriority creditor's name and mailing address Ashley Steen 335 Richmond Dr Fayetteville, NC 28472 Date(s) debt was incurred _____ Last 4 digits of account number <u>7552</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 904 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.703	Nonpriority creditor's name and mailing address Wendy Stein 213 Princess Dr Garner, NC 27529 Date(s) debt was incurred _____ Last 4 digits of account number <u>7553</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 1103 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known) _____
Name _____		
3.704	Nonpriority creditor's name and mailing address Marian Stepniewski 40 Lacebark Ln Elgin, SC 29045 Date(s) debt was incurred _____ Last 4 digits of account number <u>7554</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 905 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.705	Nonpriority creditor's name and mailing address David Stewart c/o Klein & Sheridan, LC 3566 Teays Valley Rd Hurricane, WV 25526 Date(s) debt was incurred _____ Last 4 digits of account number <u>7557</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 902 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.706	Nonpriority creditor's name and mailing address Walter Stokes 264 Pearson Hill Road Roanoke Rapids, NC 27870 Date(s) debt was incurred _____ Last 4 digits of account number <u>7560</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 908 (Annual Float)</u> Unit Type: <u>1BD; Unit 916 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.707	Nonpriority creditor's name and mailing address Jeffery Story 250 Rivers Circle Thomson, GA 30824 Date(s) debt was incurred _____ Last 4 digits of account number <u>6032</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 906 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.708	Nonpriority creditor's name and mailing address Stewart Strothers, III 5524 Berry Hill Rd Norfolk, VA 23502 Date(s) debt was incurred _____ Last 4 digits of account number <u>7565</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 908 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.709	Nonpriority creditor's name and mailing address Lawrence Stuckey, III 2059 Spring Hill Rd Dalzell, SC 29040 Date(s) debt was incurred _____ Last 4 digits of account number <u>7566</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 901 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known) _____
Name _____		
3.710	Nonpriority creditor's name and mailing address Curtis Suber 10123 Broad River Rd Pomaria, SC 29126 Date(s) debt was incurred _____ Last 4 digits of account number <u>7568</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit 920 (Biannual Float) Unit Type: 1 BD; Unit 921 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.711	Nonpriority creditor's name and mailing address Sun Hospitality Resort Services 4724 Hwy 17 Bypass South Myrtle Beach, SC 29588 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$56,708.90</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services Provided, Housekeeping</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.712	Nonpriority creditor's name and mailing address Eric Surratt 8637 Danville Pike Hillsville, VA 24343 Date(s) debt was incurred _____ Last 4 digits of account number <u>7569</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit 908 (Annual Float) Unit Type: 1 BD; Unit 918 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.713	Nonpriority creditor's name and mailing address James E. Sutton 6464 Gold Dr. Battleboro, NC 27809 Date(s) debt was incurred _____ Last 4 digits of account number <u>7571</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 901 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.714	Nonpriority creditor's name and mailing address Lynn Swinney, Jr. 9906 Hamilton Dr Douglasville, GA 30135 Date(s) debt was incurred _____ Last 4 digits of account number <u>7573</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit 1119 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.715	Nonpriority creditor's name and mailing address Lillian Sydenstricker 124 Township Rd 1290 Chesapeake, OH 45619 Date(s) debt was incurred _____ Last 4 digits of account number <u>7574</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 914 (Annual Float) Unit Type: 1 BD; Unit: 915 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known) _____
Name _____		
3.716	Nonpriority creditor's name and mailing address Ruben Tacas 8411 Morrell Ln Durham, NC 27713 Date(s) debt was incurred _____ Last 4 digits of account number <u>7576</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 918 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.717	Nonpriority creditor's name and mailing address Gregory Tackett 640 Mare Crk Stanville, KY 41659 Date(s) debt was incurred _____ Last 4 digits of account number <u>7577</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 1114 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.718	Nonpriority creditor's name and mailing address Eduardo Tanaka 107 Banyon Tree Ln Cary, NC 27513 Date(s) debt was incurred _____ Last 4 digits of account number <u>7578</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1BD; Unit: 918 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.719	Nonpriority creditor's name and mailing address Michael Tanksley 516 Hillwood Cir Augusta, GA 30909 Date(s) debt was incurred _____ Last 4 digits of account number <u>7579</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 914 (Annual Float) Unit Type: 1 BD; Unit: 915 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.720	Nonpriority creditor's name and mailing address Debra Taylor 10 Taylor Rd Spring Lake, NC 28390 Date(s) debt was incurred _____ Last 4 digits of account number <u>7580</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 905 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.721	Nonpriority creditor's name and mailing address Dijon Taylor 159 Kingsboro Road Rochester, NY 14619 Date(s) debt was incurred _____ Last 4 digits of account number <u>7581</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit 1109 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known)
Name		
3.722	Nonpriority creditor's name and mailing address Jeffrey Taylor 11403 Vega Ct Upper Marlboro, MD 20774 Date(s) debt was incurred ____ Last 4 digits of account number <u>7582</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 901 (Annual Points) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.723	Nonpriority creditor's name and mailing address Lance Taylor 45 Young Ave Cedar Grove, NJ 07009 Date(s) debt was incurred ____ Last 4 digits of account number <u>7583</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 915 (Biannual Float) Unit Type: STU; Unit: 914 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.724	Nonpriority creditor's name and mailing address Sue Taylor 455 New Churchmans Rd New Castle, DE 19720 Date(s) debt was incurred ____ Last 4 digits of account number <u>7584</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 902 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.725	Nonpriority creditor's name and mailing address Joseph Teague 1716 Drew Allen Rd Williamson, GA 30292 Date(s) debt was incurred ____ Last 4 digits of account number <u>7585</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 916 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.726	Nonpriority creditor's name and mailing address Alan Templeton 2545 McLean Chapel Church Rd Bunnlevel, NC 28323 Date(s) debt was incurred ____ Last 4 digits of account number <u>7586</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1BD; Unit: 915 (Annual Float) Unit Type: STU; Unit 914 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known)
Name		
3.727	Nonpriority creditor's name and mailing address Ronald Tharp 2294 George Hayes Rd Boone, NC 28607 Date(s) debt was incurred ____ Last 4 digits of account number <u>7587</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 901 (Annual Float) Unit Type: 1 BD; Unit: 916 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.728	Nonpriority creditor's name and mailing address Kendall Thomas 55 Pleasant Ave, Apt 2FL Johnson City, NY 13790 Date(s) debt was incurred ____ Last 4 digits of account number <u>7589</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 911 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.729	Nonpriority creditor's name and mailing address William Thomas 3032 Lake Rd Apt D Elmira, NY 14903 Date(s) debt was incurred ____ Last 4 digits of account number <u>7590</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 915 (Annual Points) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.730	Nonpriority creditor's name and mailing address Anthony Thompkins 632 Oats Street Johnsonville, SC 29555 Date(s) debt was incurred ____ Last 4 digits of account number <u>0491</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit 904 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.731	Nonpriority creditor's name and mailing address Adam Thompson 3102 Indigo Pl Seffner, FL 33584 Date(s) debt was incurred ____ Last 4 digits of account number <u>7591</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit 916 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known) _____
Name _____		
3.732	Nonpriority creditor's name and mailing address Earl Thompson 3735 Lystra Rd Chapel Hill, NC 27517 Date(s) debt was incurred _____ Last 4 digits of account number <u>7594</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU</u> ; Unit: <u>909 (Annual Float)</u> Unit Type: <u>1 BD</u> ; Unit: <u>917 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.733	Nonpriority creditor's name and mailing address Buddy Thompson, Sr. 1323 Bonlee Bennett Rd Bonlee, NC 27213 Date(s) debt was incurred _____ Last 4 digits of account number <u>7592</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU</u> ; Unit: <u>903 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.734	Nonpriority creditor's name and mailing address William Thornton PO Box 246 Tobaccoville, NC 27050-0246 Date(s) debt was incurred _____ Last 4 digits of account number <u>7596</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1BD</u> ; Unit: <u>1121 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.735	Nonpriority creditor's name and mailing address Ryan Thurman 2004 Waldner Ct Crestwood, KY 40014 Date(s) debt was incurred _____ Last 4 digits of account number <u>7597</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU</u> ; Unit: <u>911 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.736	Nonpriority creditor's name and mailing address Ervin Tisdale, Sr. 4013 Chatham Rd Baltimore, MD 21207 Date(s) debt was incurred _____ Last 4 digits of account number <u>7598</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD</u> ; Unit: <u>1115 (Annual Float)</u> Unit Type: <u>STU</u> ; Unit: <u>1114 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Sand Castle South Timeshare Owners Association, Inc. Name _____	Case number (if known) _____
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3.737	Nonpriority creditor's name and mailing address Clarence Toliver, Jr. 570 3rd St Albany, NY 12206 Date(s) debt was incurred _____ Last 4 digits of account number <u>7599</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: STU; Unit 1111 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.738	Nonpriority creditor's name and mailing address Deborah Tolles 2327 Treescap Drive Apartment 7 Charleston, SC 29414 Date(s) debt was incurred _____ Last 4 digits of account number <u>7600</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: STU; Unit: 909 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.739	Nonpriority creditor's name and mailing address Roland Tomah 106 Ashbourne Rd Irmo, SC 29063 Date(s) debt was incurred _____ Last 4 digits of account number <u>7601</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: 1 BD; Unit 1118 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.740	Nonpriority creditor's name and mailing address Joseph Tonsel, Jr. 2650 Lexington St Harrisburg, PA 17110 Date(s) debt was incurred _____ Last 4 digits of account number <u>7602</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: 1 BD; Unit 1101 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.741	Nonpriority creditor's name and mailing address Robert Torrisi 3611 Melvin Dr S Baldwinsville, NY 13027 Date(s) debt was incurred _____ Last 4 digits of account number <u>7603</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: STU; Unit: 1103 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.742	Nonpriority creditor's name and mailing address Frank Tracy 14343 Niezes Cir Winter Garden, FL 34787 Date(s) debt was incurred _____ Last 4 digits of account number <u>7604</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: 1 BD; Unit: 918 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known)
Name		
3.743	Nonpriority creditor's name and mailing address James Treadaway 548 Watts Ln Camden, SC 29020 Date(s) debt was incurred ____ Last 4 digits of account number <u>7605</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 904 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.744	Nonpriority creditor's name and mailing address Craig Treece 1520 High Top Rd Knoxville, TN 37914 Date(s) debt was incurred ____ Last 4 digits of account number <u>7606</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 901 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.745	Nonpriority creditor's name and mailing address Maria Tressler PO Box 145 Milligan College, TN 37682 Date(s) debt was incurred ____ Last 4 digits of account number <u>7607</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 908 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.746	Nonpriority creditor's name and mailing address Thomas Tricka 9716 Alvin Drive Shippensburg, PA 17257 Date(s) debt was incurred ____ Last 4 digits of account number <u>7608</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 904 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.747	Nonpriority creditor's name and mailing address Stacey Trotman 947 Renfrew St Essex, MD 21221 Date(s) debt was incurred ____ Last 4 digits of account number <u>7609</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 916 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.748	Nonpriority creditor's name and mailing address TSA Choice 108 Asheville Commerce Pkwy Candler, NC 28715 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$333.47 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services Provided</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.749	Nonpriority creditor's name and mailing address Dennis D. Tucholski Taylor Moore Law, LLC Taylor Charles Moore 431 S. Jefferson, Suite 116B Springfield, MO 65806 Date(s) debt was incurred _____ Last 4 digits of account number <u>7610</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 905 (Annual Fixed)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.750	Nonpriority creditor's name and mailing address Michael Tucker 64 Larned Road Pennellville, NY 13132 Date(s) debt was incurred _____ Last 4 digits of account number <u>7611</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1BD; Unit 1117 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.751	Nonpriority creditor's name and mailing address Clifton Turner 2641 Vienna Dozier Rd Pfafftown, NC 27040 Date(s) debt was incurred _____ Last 4 digits of account number <u>7612</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 901 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.752	Nonpriority creditor's name and mailing address Earnest Turner 3924 Grape Avenue Augusta, GA 30909 Date(s) debt was incurred _____ Last 4 digits of account number <u>7613</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 908 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.753	Nonpriority creditor's name and mailing address Darrien S. Tutt 323 W Champlost St Philadelphia, PA 19120 Date(s) debt was incurred _____ Last 4 digits of account number <u>7614</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 908 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.754	Nonpriority creditor's name and mailing address Mary Tutterow 1251 Bethune Way The Villages, FL 32162 Date(s) debt was incurred _____ Last 4 digits of account number <u>7615</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 908 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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Name _____		
3.755	Nonpriority creditor's name and mailing address April Tyler 1505 Joy Anne Ct Mount Holly, NC 28120 Date(s) debt was incurred _____ Last 4 digits of account number <u>7616</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 1119 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.756	Nonpriority creditor's name and mailing address Jerry Uadiski 5699 Route 259 Hwy Homer City, PA 15748 Date(s) debt was incurred _____ Last 4 digits of account number <u>7617</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 906 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.757	Nonpriority creditor's name and mailing address Rex Uhl 4221 Henderson Rd Greensboro, NC 27410 Date(s) debt was incurred _____ Last 4 digits of account number <u>7618</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 907 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.758	Nonpriority creditor's name and mailing address Sandra Utria 131 Kensington Ave, Apt B6 Jersey City, NJ 07304 Date(s) debt was incurred _____ Last 4 digits of account number <u>7620</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 910 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.759	Nonpriority creditor's name and mailing address Vacation Weeks, LLC a/k/a Blue Water One Vance Gap Road Asheville, NC 28805 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$67,979.85</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Payroll Reimbursement</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.760	Nonpriority creditor's name and mailing address Rejimon Varghese 3651 Cherry Hill Dr Greensboro, NC 27410 Date(s) debt was incurred _____ Last 4 digits of account number <u>7623</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 906 (Annual Float)</u> Unit Type: <u>1 BD; Unit: 920 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.761	Nonpriority creditor's name and mailing address Ruben Vasquez 127B S Rosewell Ave South Amboy, NJ 08879 Date(s) debt was incurred _____ Last 4 digits of account number <u>7624</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: NOTICE PURPOSES ONLY <u>Unit Type: 1 BD; Unit: 901 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.762	Nonpriority creditor's name and mailing address Robert Vaughan 2341 Fishing Creek Rd North Wilkesboro, NC 28659 Date(s) debt was incurred _____ Last 4 digits of account number <u>7625</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: NOTICE PURPOSES ONLY <u>Unit Type: STU; Unit: 903 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.763	Nonpriority creditor's name and mailing address Karen Vaught 3409 Buckwood Trl Salem, VA 24153 Date(s) debt was incurred _____ Last 4 digits of account number <u>7627</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: NOTICE PURPOSES ONLY <u>Unit Type: STU; Unit: 914 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.764	Nonpriority creditor's name and mailing address Arturo Vazquez 1712 S Alston Ave Durham, NC 27707 Date(s) debt was incurred _____ Last 4 digits of account number <u>7628</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: NOTICE PURPOSES ONLY <u>Unit Type: STU; Unit: 902 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.765	Nonpriority creditor's name and mailing address Nancy Vazquez 59 Wilson St New Haven, CT 06519 Date(s) debt was incurred _____ Last 4 digits of account number <u>7629</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: NOTICE PURPOSES ONLY <u>Unit Type: STU; Unit: 903 (Biennial Points)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.766	Nonpriority creditor's name and mailing address Mark Venable 102 Parkway Dr Easley, SC 29640 Date(s) debt was incurred _____ Last 4 digits of account number <u>7630</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: NOTICE PURPOSES ONLY <u>Unit Type: 1 BD; Unit 920 (Biannual Float)</u> <u>Unit Type: 1 BD; Unit 921 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known)
Name		
3.767	Nonpriority creditor's name and mailing address Anna Viers 238 Westwood Dr Columbia, KY 42728 Date(s) debt was incurred ____ Last 4 digits of account number <u>7631</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 1101 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.768	Nonpriority creditor's name and mailing address Robert Vittitoe 17101 Mallett Dr Louisville, KY 40245 Date(s) debt was incurred ____ Last 4 digits of account number <u>7632</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 917 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.769	Nonpriority creditor's name and mailing address Charles Wagner 42 Moyer Avenue Charleroi, PA 15022 Date(s) debt was incurred ____ Last 4 digits of account number <u>7633</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1BD; Unit: 915 (Annual Float) Unit Type: STU; Unit 912 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.770	Nonpriority creditor's name and mailing address James Wagner, Jr. 5360 Altenwald Rd Waynesboro, PA 17268 Date(s) debt was incurred ____ Last 4 digits of account number <u>7634</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 901 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.771	Nonpriority creditor's name and mailing address Albert Walker c/o Beverly Mayes 5964 Stanleyville Dr Rural Hall, NC 27045 Date(s) debt was incurred ____ Last 4 digits of account number <u>7635</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 1114 (Annual Float) Unit Type: 1 BD; Unit: 1115 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known)
Name		
3.772	Nonpriority creditor's name and mailing address Kenneth Walker 6508 Century Ln Burton, MI 48509-2380 Date(s) debt was incurred _____ Last 4 digits of account number <u>7637</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 906 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.773	Nonpriority creditor's name and mailing address Maurice Walker, Sr. 468 Julia Dr Romeoville, IL 60446 Date(s) debt was incurred _____ Last 4 digits of account number <u>7638</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 904 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.774	Nonpriority creditor's name and mailing address Sherman Wallace, Jr. 420 Folkstone Rd Columbia, SC 29223 Date(s) debt was incurred _____ Last 4 digits of account number <u>7639</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 903 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.775	Nonpriority creditor's name and mailing address Nakesha Walton 709 Kings Crest Dr Stafford, VA 22554 Date(s) debt was incurred _____ Last 4 digits of account number <u>7641</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 906 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.776	Nonpriority creditor's name and mailing address Robert Walton 514 Rocky Creek Rd Johnston, SC 29832 Date(s) debt was incurred _____ Last 4 digits of account number <u>7642</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 901 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.777	Nonpriority creditor's name and mailing address Paul Wassell 4021 Westernport Rd Westernport, MD 21562 Date(s) debt was incurred _____ Last 4 digits of account number <u>7644</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 920 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Sand Castle South Timeshare Owners Association, Inc. <small>Name</small>	Case number (if known) _____
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3.778	Nonpriority creditor's name and mailing address Dallas Waters 1112 Williams Ln Elberton, GA 30635 Date(s) debt was incurred _____ Last 4 digits of account number <u>7645</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: STU; Unit: 903 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.779	Nonpriority creditor's name and mailing address Kenneth Watson 3915 Northrop Drive Haw River, NC 27258 Date(s) debt was incurred _____ Last 4 digits of account number <u>7649</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: 1BR; Unit: 1115 (Biannual Float)</u> <u>Unit Type: STU; Unit: 1114 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.780	Nonpriority creditor's name and mailing address Warrell Watson 10312 Millarden Rd Woodbury, GA 30293 Date(s) debt was incurred _____ Last 4 digits of account number <u>0492</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: STU; Unit 905 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.781	Nonpriority creditor's name and mailing address Robyn Weatherford 810 Simpson Ln Hartsville, SC 29550 Date(s) debt was incurred _____ Last 4 digits of account number <u>7651</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: 1BD; Unit: 920 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.782	Nonpriority creditor's name and mailing address John Welborn PO Box 284 Glen Alpine, NC 28628 Date(s) debt was incurred _____ Last 4 digits of account number <u>7652</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: 1 BD; Unit: 919 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.783	Nonpriority creditor's name and mailing address Zereda M. Wells 8400 Reed Rd Stony Creek, VA 23882 Date(s) debt was incurred _____ Last 4 digits of account number <u>7653</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: 1 BD; Unit: 917 (Annual Points)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known) _____
Name _____		
3.784	Nonpriority creditor's name and mailing address Robert Wert, Jr. 2829 Meade Dr Grand Prairie, TX 75052 Date(s) debt was incurred _____ Last 4 digits of account number <u>7654</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 920 (Annual Float) Unit Type: 1 BD; Unit: 921 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.785	Nonpriority creditor's name and mailing address Cameron Wesley, Sr. 116 Melstone Dr Hopkins, SC 29061 Date(s) debt was incurred _____ Last 4 digits of account number <u>7655</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 906 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.786	Nonpriority creditor's name and mailing address Tyronza Wesley 2 Culupa Ct Blythewood, SC 29016 Date(s) debt was incurred _____ Last 4 digits of account number <u>7656</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 908 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.787	Nonpriority creditor's name and mailing address Chet West 3209 Gresham Lake Rd Raleigh, NC 27615 Date(s) debt was incurred _____ Last 4 digits of account number <u>7657</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 902 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.788	Nonpriority creditor's name and mailing address Charles Wetmore, II 232 University Pkwy Okatie, SC 29909 Date(s) debt was incurred _____ Last 4 digits of account number <u>4209</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit 917 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.789	Nonpriority creditor's name and mailing address Thomas Whalen 45 Davis St Meriden, CT 06450 Date(s) debt was incurred _____ Last 4 digits of account number <u>7658</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 1115 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known)
Name		
3.790	Nonpriority creditor's name and mailing address Rodney White 1314 Shirebourn Hickory, NC 28602 Date(s) debt was incurred _____ Last 4 digits of account number <u>7659</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 916 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.791	Nonpriority creditor's name and mailing address Wayne White 10 Twin Springs Dr Fredericksburg, VA 22407 Date(s) debt was incurred _____ Last 4 digits of account number <u>7660</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 902 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.792	Nonpriority creditor's name and mailing address Hugh Whitley 219 Franklin St Albemarle, NC 28001 Date(s) debt was incurred _____ Last 4 digits of account number <u>7661</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 905 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.793	Nonpriority creditor's name and mailing address John Whitworth 1140 Longbranch Rd Grover, NC 28073 Date(s) debt was incurred _____ Last 4 digits of account number <u>7663</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 1119 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.794	Nonpriority creditor's name and mailing address Robert Wiggins 90 Conklin Avenue Binghamton, NY 13903 Date(s) debt was incurred _____ Last 4 digits of account number <u>7665</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1-BD; Unit: 916 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.795	Nonpriority creditor's name and mailing address Christopher Wilcken 23 Oriole Path Liverpool, NY 13090 Date(s) debt was incurred _____ Last 4 digits of account number <u>7667</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 905 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known) _____
Name _____		
3.796	Nonpriority creditor's name and mailing address Arnold Wilkerson 793 Lester Rd Chatham, VA 24531 Date(s) debt was incurred _____ Last 4 digits of account number <u>7669</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 919 (Annual Float)</u> Unit Type: <u>STU; Unit 914 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.797	Nonpriority creditor's name and mailing address Robert Wilks, Sr. 6014 Surrey Square Ln, Apt. T3 District Heights, MD 20747 Date(s) debt was incurred _____ Last 4 digits of account number <u>7670</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 920 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.798	Nonpriority creditor's name and mailing address Westley Williams, Jr. 1300 Ridgeway Rd Lugoff, SC 29078 Date(s) debt was incurred _____ Last 4 digits of account number <u>7673</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 903 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.799	Nonpriority creditor's name and mailing address Keith Williams 8114 Solace Ct Charlotte, NC 28269 Date(s) debt was incurred _____ Last 4 digits of account number <u>7674</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 901 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.800	Nonpriority creditor's name and mailing address Leatha Williams 366 Ridenour Ln Jacksboro, TN 37757 Date(s) debt was incurred _____ Last 4 digits of account number <u>7675</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit: 916 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known) _____
Name _____		
3.801	Nonpriority creditor's name and mailing address Lisa L. Williams 7209 Stuart Dr Raleigh, NC 27615 Date(s) debt was incurred _____ Last 4 digits of account number <u>7676</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 903 (Biannual Float)</u> Unit Type: <u>1 BD; Unit: 918 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.802	Nonpriority creditor's name and mailing address Mark Williams 2930 NE Gilmer Avenue Winston Salem, NC 27105 Date(s) debt was incurred _____ Last 4 digits of account number <u>7677</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1BD; Unit 921 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.803	Nonpriority creditor's name and mailing address Reamus Williams 177 Hitchcock Rd Aiken, SC 29803 Date(s) debt was incurred _____ Last 4 digits of account number <u>7678</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 902 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.804	Nonpriority creditor's name and mailing address Douglas L. Williamson PO Box 1253 Hartsville, SC 29551 Date(s) debt was incurred _____ Last 4 digits of account number <u>7680</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 905 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.805	Nonpriority creditor's name and mailing address John Williford 386 Yesebehena Cir Rock Hill, SC 29730 Date(s) debt was incurred _____ Last 4 digits of account number <u>7681</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 905 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.806	Nonpriority creditor's name and mailing address Betty Wilson 346 Clark Ct Dillon, SC 29536 Date(s) debt was incurred _____ Last 4 digits of account number <u>7682</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 1101 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known) _____
Name _____		
3.807	Nonpriority creditor's name and mailing address Gerry Wilson 1873 Bethel New Hope Rd Bethel, OH 45106 Date(s) debt was incurred _____ Last 4 digits of account number <u>7684</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 1115 (Biannual Float) Unit Type: STU; Unit: 1114 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.808	Nonpriority creditor's name and mailing address James Wilson 2675 Maidenhair Ln Sumter, SC 29153 Date(s) debt was incurred _____ Last 4 digits of account number <u>7685</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 903 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.809	Nonpriority creditor's name and mailing address Layden Wilson 106 Oak St Spring Church, PA 15686 Date(s) debt was incurred _____ Last 4 digits of account number <u>7686</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: STU; Unit: 1114 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.810	Nonpriority creditor's name and mailing address Charles Witherspoon, Jr. 135 W Morehead Street Charlotte, NC 28202 Date(s) debt was incurred _____ Last 4 digits of account number <u>7687</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 901 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.811	Nonpriority creditor's name and mailing address Withumsmith+Brown, PC PO Box 5340 Princeton, NJ 08543 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.812	Nonpriority creditor's name and mailing address Michael Wolf 12925 Hwy 902 NC Bear Creek, NC 27207 Date(s) debt was incurred _____ Last 4 digits of account number <u>7688</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: 1 BD; Unit: 915 (Biannual Float) Unit Type: STU; Unit: 914 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Sand Castle South Timeshare Owners Association, Inc. Name _____	Case number (if known) _____
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3.813	Nonpriority creditor's name and mailing address William Wolf 4165 Saddlehorn Dr Evans, GA 30809 Date(s) debt was incurred _____ Last 4 digits of account number <u>7689</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: 1BD; Unit: 916 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.814	Nonpriority creditor's name and mailing address Madeline Wood 400 Avinger Lane, #905 Davidson, NC 28036 Date(s) debt was incurred _____ Last 4 digits of account number <u>7691</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: 1 BD; Unit: 915 (Annual Points)</u> <u>Unit Type: STU; Unit: 914 (Annual Points)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.815	Nonpriority creditor's name and mailing address Virginia Woodcock 13588 Greenwood Rd Glen Allen, VA 23059 Date(s) debt was incurred _____ Last 4 digits of account number <u>7693</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: 1 BD; Unit: 921 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.816	Nonpriority creditor's name and mailing address Robert Woods 11 Arnold Rd SE Statham, GA 30666 Date(s) debt was incurred _____ Last 4 digits of account number <u>7692</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: STU; Unit: 905 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.817	Nonpriority creditor's name and mailing address Ronald Worsham 401 E Main St Mount Orab, OH 45154 Date(s) debt was incurred _____ Last 4 digits of account number <u>7694</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: 1 BD; Unit 1101 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.818	Nonpriority creditor's name and mailing address Angele Wright 2629 Lake Capri Dr Conyers, GA 30012 Date(s) debt was incurred _____ Last 4 digits of account number <u>7695</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> <u>Unit Type: STU; Unit: 902 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor Sand Castle South Timeshare Owners Association, Inc.		Case number (if known) _____
Name _____		
3.819	Nonpriority creditor's name and mailing address Dennis Wright 10849 W Oak Hill Rd Birdseye, IN 47513 Date(s) debt was incurred _____ Last 4 digits of account number <u>7696</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit: 1103 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.820	Nonpriority creditor's name and mailing address Joseph Wright, Sr. 4512 Biesterfield Dr Charlotte, NC 28216 Date(s) debt was incurred _____ Last 4 digits of account number <u>7697</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 904 (Annual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.821	Nonpriority creditor's name and mailing address Gary Wynn 3846 Belair Rd Augusta, GA 30909 Date(s) debt was incurred _____ Last 4 digits of account number <u>7698</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 1114 (Biannual Float)</u> Unit Type: <u>1 BD; Unit 1115 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.822	Nonpriority creditor's name and mailing address Henry Yeldell 268 Plum Branch Rd Edgefield, SC 29824 Date(s) debt was incurred _____ Last 4 digits of account number <u>7699</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>1 BD; Unit 918 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.823	Nonpriority creditor's name and mailing address Douglas Young 987 Hiles Rd Lucasville, OH 45648 Date(s) debt was incurred _____ Last 4 digits of account number <u>7701</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NOTICE PURPOSES ONLY</u> Unit Type: <u>STU; Unit 1103 (Biannual Float)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Sand Castle South Timeshare Owners Association, Inc. <small>Name</small>	Case number (if known) _____
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3.824	Nonpriority creditor's name and mailing address Doye Young 122 Country Ln Easley, SC 29642 Date(s) debt was incurred _____ Last 4 digits of account number <u>7702</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: NOTICE PURPOSES ONLY Unit Type: 1BD; Unit 1115 (Annual Float) Unit Type: STU; Unit 1114 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.825	Nonpriority creditor's name and mailing address Jennifer Young PO Box 169 Downs, IL 61736 Date(s) debt was incurred _____ Last 4 digits of account number <u>7703</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: NOTICE PURPOSES ONLY Unit Type: 1BD; Unit: 1121 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.826	Nonpriority creditor's name and mailing address John Zimmerman 68 Sandra Dr Newport News, VA 23608 Date(s) debt was incurred _____ Last 4 digits of account number <u>7706</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: NOTICE PURPOSES ONLY Unit Type: STU; Unit: 1114 (Biannual Float) Unit Type: 1 BD; Unit: 1115 (Biannual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.827	Nonpriority creditor's name and mailing address Edward Zywczo 13 Brant Ave St Thomas ON N5R1Z4 Date(s) debt was incurred _____ Last 4 digits of account number <u>7707</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: NOTICE PURPOSES ONLY Unit Type: 1 BD; Unit 919 (Annual Float) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

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Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

	<table border="0" style="width: 100%;"> <tr> <td colspan="2" style="text-align: center;">Total of claim amounts</td> </tr> <tr> <td style="width: 10%;">5a. Total claims from Part 1</td> <td style="width: 90%;">\$ <u>42,585.81</u></td> </tr> <tr> <td>5b. Total claims from Part 2</td> <td>+</td> </tr> <tr> <td></td> <td style="text-align: right;">\$ <u>783,925.24</u></td> </tr> <tr> <td colspan="2" style="height: 10px;"></td> </tr> <tr> <td>5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.</td> <td style="text-align: right;">\$ <u>826,511.05</u></td> </tr> </table>	Total of claim amounts		5a. Total claims from Part 1	\$ <u>42,585.81</u>	5b. Total claims from Part 2	+		\$ <u>783,925.24</u>			5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	\$ <u>826,511.05</u>
Total of claim amounts													
5a. Total claims from Part 1	\$ <u>42,585.81</u>												
5b. Total claims from Part 2	+												
	\$ <u>783,925.24</u>												
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	\$ <u>826,511.05</u>												

Fill in this information to identify the case:

Debtor name **Sand Castle South Timeshare Owners Association, Inc.**

United States Bankruptcy Court for the: **DISTRICT OF SOUTH CAROLINA**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).

Property

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest **Maintenance for the timeshare units.**

State the term remaining

List the contract number of any government contract _____

**CRM of the Carolinas, LLC
3660 Old Kings Hwy
Murrells Inlet, SC 29576**

2.2. State what the contract or lease is for and the nature of the debtor's interest **Management Company**

State the term remaining

List the contract number of any government contract _____

**LaTour Hotels and Resorts, Inc.
One Vance Gap Road
Asheville, NC 28805**

2.3. State what the contract or lease is for and the nature of the debtor's interest **Timeshare exchange**

State the term remaining

List the contract number of any government contract _____

**Resort Travel and Xchange, Inc.
One Vance Gap Road
Asheville, NC 28805**

2.4. State what the contract or lease is for and the nature of the debtor's interest **Collection and loan services**

State the term remaining

List the contract number of any government contract _____

**Zealandia Capital, Inc
One Vance Gap Road
Asheville, NC 28805**

Fill in this information to identify the case:

Debtor name **Sand Castle South Timeshare Owners Association, Inc.**

United States Bankruptcy Court for the: **DISTRICT OF SOUTH CAROLINA**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206H

Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

- ☒ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
☐ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name	Mailing Address	Name	Check all schedules that apply:
2.1 _____	Street _____ _____ City _____ State _____ Zip Code _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.2 _____	Street _____ _____ City _____ State _____ Zip Code _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.3 _____	Street _____ _____ City _____ State _____ Zip Code _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.4 _____	Street _____ _____ City _____ State _____ Zip Code _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Fill in this information to identify the case:

Debtor name Sand Castle South Timeshare Owners Association, Inc.

United States Bankruptcy Court for the: DISTRICT OF SOUTH CAROLINA

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/19

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

☐ None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

From the beginning of the fiscal year to filing date:
From 1/01/2019 to **Filing Date**

Sources of revenue
Check all that apply

☒ Operating a business
☐ Other _____

Gross revenue
(before deductions and exclusions)

\$117,614.22

For prior year:
From 1/01/2018 to 12/31/2018

☒ Operating a business
☐ Other _____

\$1,037,000.74

For year before that:
From 1/01/2017 to 12/31/2017

☒ Operating a business
☐ Other _____

\$939,758.62

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.

Description of sources of revenue

Gross revenue from each source
(before deductions and exclusions)

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None.

Creditor's Name and Address

Dates

Total amount of value

Reasons for payment or transfer
Check all that apply

Debtor **Sand Castle South Timeshare Owners Association, Inc.**

Case number (if known) _____

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. Cherokee Motels, Inc. PO Box 1362 Myrtle Beach, SC 29578		\$40,000.00	<input type="checkbox"/> Secured debt <input checked="" type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other___
3.2. The Debtor made payments to other creditors within the 90 days before filing; however, the aggregate to each of these creditors was less than \$6,825.		Unknown	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other___

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership 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(31).

☒ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
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5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Describe of the Property	Date	Value of property
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6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
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Debtor **Sand Castle South Timeshare Owners Association, Inc.**

Case number (if known) _____

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1.	Michael Gerber vs. Sand Castle Southbeach, LLC, Sand Castle South Beach Rental Management Company, LLC, Sand Castle South Condo, LLC, Sand Castle South Homeowners' Association, Inc., and Sand Castle South Timeshare Owners Association, Inc. 2018-CP-26-02536	The Debtor has been dismissed from this action.	Horry County Circuit Court	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

Part 4: Certain Gifts and Charitable Contributions**9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**

☒ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
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Part 5: Certain Losses**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**

☒ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Dates of loss	Value of property lost
	<p>If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.</p> <p>List unpaid claims on Official Form 106A/B (<i>Schedule A/B: Assets – Real and Personal Property</i>).</p>		

Part 6: Certain Payments or Transfers**11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

Debtor **Sand Castle South Timeshare Owners Association, Inc.**

Case number (if known) _____

	Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1.	Nexsen Pruet, LLC 1230 Main Street, Suite 700 (29201) PO Box 2426 Columbia, SC 29202	Retainer for bankruptcy consultation, preparation and filing.	March 18, 2019	\$75,000.00
	Email or website address rmendoza@nexsenpruet.com			
	Who made the payment, if not debtor?			

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
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Part 7: Previous Locations**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply

Address	Dates of occupancy From-To
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Part 8: Health Care Bankruptcies**15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

☒ No. Go to Part 9.

☐ Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
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Part 9: Personally Identifiable Information

Debtor **Sand Castle South Timeshare Owners Association, Inc.**

Case number (if known) _____

16. Does the debtor collect and retain personally identifiable information of customers?

- ☐ No.
- ☒ Yes. State the nature of the information collected and retained.

Name and contact information

Does the debtor have a privacy policy about that information?

- ☐ No
- ☒ Yes

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- ☒ No. Go to Part 10.
- ☐ Yes. Does the debtor serve as plan administrator?

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☐ None

Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1. Bank of America	XXXX-4356	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other__		\$0.00

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Do you still have it?
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20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☒ None

Facility name and address	Names of anyone with access to it	Description of the contents	Do you still have it?
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Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own

Debtor **Sand Castle South Timeshare Owners Association, Inc.**

Case number (if known) _____

21. Property held for another

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None

Part 12: Details About Environment Information

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No.
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
---------------------------	-------------------------------------	--------------------	----------------

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	---------------------------------------	-----------------------------	----------------

24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	---------------------------------------	-----------------------------	----------------

Part 13: Details About the Debtor's Business or Connections to Any Business**25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

☒ None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
-----------------------	-------------------------------------	--

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None

Name and address	Date of service From-To
------------------	----------------------------

Debtor **Sand Castle South Timeshare Owners Association, Inc.**

Case number (if known) _____

Name and address		Date of service From-To
26a.1.	LaTour Hotels & Resorts, Inc. One Vance Gap Road Asheville, NC 28805	From January 1, 2018 to present.
26a.2.	Patton Hospitality Management One Vance Gap Road Asheville, NC 28805	Prior to January 1, 2018

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☐ None

Name and address		Date of service From-To
26b.1.	Withumsmith+Brown, PC 200 South Orange Ave, Suite 1200 Orlando, FL 32801	

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☐ None

Name and address		If any books of account and records are unavailable, explain why
26c.1.	LaTour Hotels & Resorts, Inc. One Vance Gap Road Asheville, NC 28805	

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☒ None

Name and address

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No

☐ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
---	-------------------	--

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Herbert H. Patrick, Jr.	One Vance Gap Road Asheville, NC 28805	President and Director	
Kyle Smith	One Vance Gap Road Asheville, NC 28805	Secretary, Treasurer and Director	

Debtor **Sand Castle South Timeshare Owners Association, Inc.**

Case number (if known) _____

Name	Address	Position and nature of any interest	% of interest, if any
Mike Pawlowski	One Vance Gap Road Asheville, NC 28805	Vice President	

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

- ☐ No
☒ Yes. Identify below.

Name	Address	Position and nature of any interest	Period during which position or interest was held
Barney Barber	3354 Reed Street, Apt. 101 Myrtle Beach, SC 29577	Former President and Director	Resigned as of August 7, 2018

Name	Address	Position and nature of any interest	Period during which position or interest was held
Roger Bennett	One Vance Gap Road Asheville, NC 28805	Former Secretary, Treasurer and Director	Resigned as of August 7, 2018

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☒ No
☐ Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
-------------------------------	--	-------	--------------------------------

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☒ No
☐ Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
--------------------------------	--

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No
☐ Yes. Identify below.

Name of the pension fund	Employer Identification number of the parent corporation
--------------------------	--

Debtor Sand Castle South Timeshare Owners Association, Inc.

Case number (if known) _____

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on May 22, 2019

/s/ Herbert H. Patrick, Jr.

Signature of individual signing on behalf of the debtor

Herbert H. Patrick, Jr.

Printed name

Position or relationship to debtor President

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

☒ No

☐ Yes

United States Bankruptcy Court
District of South Carolina

In re **Sand Castle South Timeshare Owners Association, Inc.**

Debtor(s)

Case No.

Chapter **11**

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

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

For legal services, I have agreed to accept	\$	To be billed hourly, and paid upon approval by the Court
Prior to the filing of this statement I have received	\$	75,000.00¹
Balance Due	\$	To be billed hourly, and paid upon approval by the Court

2. \$ **1,717.00** of the filing fee has been paid.
3. The source of the compensation paid to me was:
☒ Debtor ☐ Other (specify):
4. The source of compensation to be paid to me is:
☒ Debtor ☐ Other (specify):
5. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.
6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
 - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
 - d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
 - e. [Other provisions as needed]

¹ Nexsen Pruet, LLC received a \$75,000.00 retainer from the Debtor on March 18, 2019. From this amount, Nexsen Pruet has been paid \$37,174.30 in compensation for its pre-petition services and for reimbursement of costs. In addition, the \$1,717.00 Chapter 11 filing fee has been deducted from the retainer. The remaining funds of \$36,108.70 will be held in escrow by Nexsen Pruet, pending approval of its fee application(s) by the Court.

In re **Sand Castle South Timeshare Owners Association, Inc.**

Case No. _____

Debtor(s)

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)
(Continuation Sheet)

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

CERTIFICATION

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

May 22, 2019

Date

/s/ Julio E. Mendoza, Jr.

Julio E. Mendoza, Jr. 3365

Signature of Attorney

Nexsen Pruet, LLC

1230 Main Street, Suite 700 (29201)

PO Box 2426

Columbia, SC 29202

803-540-2026 Fax: 803-727-1478

rmendoza@nexsenpruet.com

Name of law firm

**United States Bankruptcy Court
District of South Carolina**

In re **Sand Castle South Timeshare Owners Association, Inc.**

Debtor(s)

Case No.

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
--	----------------	----------------------	------------------

None

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 22, 2019**

Signature **/s/ Herbert H. Patrick, Jr.**
Herbert H. Patrick, Jr.

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

LOCAL OFFICIAL FORM 1007-1(b) TO SC LBR 1007-1

United States Bankruptcy Court
District of South Carolina

In re Sand Castle South Timeshare Owners Association, Inc.

Debtor(s)

Case No. _____

Chapter 11

CERTIFICATION VERIFYING CREDITOR MATRIX

The above named debtor, or attorney for the debtor if applicable, hereby certifies pursuant to South Carolina Local Bankruptcy Rule 1007-1 that the master mailing list of creditors submitted either on computer diskette, electronically filed via CM/ECF, or conventionally filed in a typed hard copy scannable format which has been compared to, and contains identical information to, the debtor's schedules, statements and lists which are being filed at this time or as they currently exist in draft form.

Master mailing list of creditors submitted via:

- (a) _____ computer diskette
- (b) _____ scannable hard copy
(number of sheets submitted _____)
- (c) X electronic version filed via CM/ECF

Date: May 22, 2019

/s/ Herbert H. Patrick, Jr.

Herbert H. Patrick, Jr./President
Signer/Title

Date: May 22, 2019

/s/ Julio E. Mendoza, Jr.

Signature of Attorney
Julio E. Mendoza, Jr. 3365
Nexsen Pruet, LLC
1230 Main Street, Suite 700 (29201)
PO Box 2426
Columbia, SC 29202
803-540-2026 Fax: 803-727-1478

Typed/Printed Name/Address/Telephone

3365 SC

District Court I.D. Number

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CHICAGO IL 60647

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KERSHAW SC 29067

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HOPE MILLS NC 28348

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CARNESVILLE GA 30521

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VASS NC 28327

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DENVER NC 28037

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UPTON KY 42784

JEFFREY ANDERSON
2641 SUDIE DR
BURLINGTON NC 27217

SHAWNTAY ANTHONY
911 BELTON STREET
MONROE NC 28110

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NORTH WALES PA 19454

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FRANKLIN VA 23851

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MOUNT HOLLY NC 28120

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114 ZOE CIR
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ABINGDON VA 24266

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MATTHEWS NC 28105

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EGG HARBOR TOWNSHIP NJ 08234

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RUDOLPH DAVIS
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WINDSOR MILL MD 21244

NORMAN DEAL
3040 SALEM ROAD
PARROTTSVILLE TN 37843-2207

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FAYETTEVILLE NC 28314

BELINDA DELINE
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COLUMBIA SC 29229

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1907 BELLEVILLE DRIVE, NE
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116 MELSTONE DR
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ROCK HILL SC 29730

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68 SANDRA DR
NEWPORT NEWS VA 23608

EDWARD ZYWCZOK
13 BRANT AVE
ST THOMAS ON N5R1Z4

**United States Bankruptcy Court
District of South Carolina**

In re **Sand Castle South Timeshare Owners Association, Inc.**

Debtor(s)

Case No.

Chapter

11

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

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

☒ None [*Check if applicable*]

May 22, 2019

Date

/s/ Julio E. Mendoza, Jr.

Julio E. Mendoza, Jr. 3365

Signature of Attorney or Litigant

Counsel for **Sand Castle South Timeshare Owners Association, Inc.**

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