UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF FLORIDA
www.flsb.uscourts.gov
_____ Division

In re: Case No.
Chapter 11

_____Debtor_____/

CHAPTER 11 CASE MANAGEMENT SUMMARY

In compliance with Local Rule 2081-1(B), the Debtor-in-Possession [Trustee], _____, files this Chapter 11 Case Management Summary and states:

The following data represents approximations for background information only and the information may represent the Debtor's [Trustee's] best estimate in response to some of the ensuing questions.

1. Date of Order for Relief under chapter 11 (filing date of petition if voluntary chapter 11 petition):

2. Names, case numbers and dates of filing of related debtors:

3. Description of debtor's business:

4. Locations of debtor's operations and whether the business premises are leased or owned:

5. Reasons for filing chapter 11:

6. List of officers and directors, if applicable, and their salaries and benefits at the time of filing and during the 1 year prior to filing:

7. Debtor's fiscal or calendar year to date gross income and the debtor's gross income for the calendar or fiscal year prior to the filing of this petition:

8. Amounts owed to various creditors:

    a. Obligations owed to priority creditors including priority tax obligations:

b. With respect to creditors holding secured claims, the name of and amounts owed to such creditors and a description and estimated value of all collateral of the debtor securing their claims, and

c. Amount of unsecured claims:

9. General description and approximate value of the debtor's assets:

10. List of all insurance policies, the property covered under the policy, the name of the insurer, the policy number, amount of coverage, whether the premium is current, the date the next premium is due and date the policy expires;

11. Number of employees and amounts of wages owed as of petition date:

12. Status of debtor's payroll and sales tax obligations, if applicable. This does not eliminate the obligation of chapter 11 debtors (other than individuals not engaged in business) to provide the more detailed payroll tax information required by Local Rule 2081-1(A):

13. Anticipated emergency relief to be requested within 14 days from the petition date:

_____
Signature

_____
(Name of Corporate Officer or Authorized Representative)

_____
Signature

_____
Name and Address of Debtor's Attorney

_____

_____
Florida Bar No.

Attach or file separately a Local Rule 2002-1(F) certificate of service reflecting manner and date of service on all affected parties.