

UNITED STATES BANKRUPTCY COURT		PROOF OF CLAIM
Name of Debtor: The Cliffs Club and Hospitality Group, Inc. et al		Case Number:
NOTE: <i>Do not use this form to make a claim for an administrative expense that arises after the bankruptcy filing. You may file a request for payment of an administrative expense according to 11 U.S.C. § 503.</i>		
Name of Creditor (the person or other entity to whom the debtor owes money or property): Joseph M. Endry		COURT USE ONLY
Name and address where notices should be sent: Joseph M. Endry 4403 Soundside Drive Gulf Breeze, FL 32563 Telephone number: (850) 435-5300 email: joe@joeendry.com		<input type="checkbox"/> Check this box if this claim amends a previously filed claim. Court Claim Number: _____ (If known) Filed on: _____
Name and address where payment should be sent (if different from above): Telephone number: _____ email: _____		
<div style="font-size: 24px; font-weight: bold; margin: 0;">RECEIVED</div> <div style="font-size: 24px; font-weight: bold; margin: 0;">MAY 15 2012</div> <div style="font-size: 24px; font-weight: bold; margin: 0;">BMC GROUP</div>		
1. Amount of Claim as of Date Case Filed: \$ <u>100,000.00</u> If all or part of the claim is secured, complete item 4. If all or part of the claim is entitled to priority, complete item 5. <input type="checkbox"/> Check this box if the claim includes interest or other charges in addition to the principal amount of the claim. Attach a statement that itemizes interest or charges.		
2. Basis for Claim: <u>Refundable Initiation Deposit</u> (See instruction #2)		
3. Last four digits of any number by which creditor identifies debtor: 8 8 9 1	3a. Debtor may have scheduled account as: <u>E00135</u> (See instruction #3a)	3b. Uniform Claim Identifier (optional): _____ (See instruction #3b)
4. Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a right of setoff, attach required redacted documents, and provide the requested information. Nature of property or right of setoff: <input checked="" type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other Describe: Secured by assets of the Club Value of Property: \$ <u>100,000.00</u> Annual Interest Rate _____ % <input type="checkbox"/> Fixed or <input type="checkbox"/> Variable (when case was filed)		Amount of arrearage and other charges, as of the time case was filed, included in secured claim, if any: \$ _____ Basis for perfection: _____ Amount of Secured Claim: \$ <u>100,000.00</u> Amount Unsecured: \$ _____
5. Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any part of the claim falls into one of the following categories, check the box specifying the priority and state the amount.		
<input type="checkbox"/> Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B).	<input type="checkbox"/> Wages, salaries, or commissions (up to \$11,725*) earned within 180 days before the case was filed or the debtor's business ceased, whichever is earlier – 11 U.S.C. § 507 (a)(4).	<input type="checkbox"/> Contributions to an employee benefit plan – 11 U.S.C. § 507 (a)(5). Amount entitled to priority: \$ _____
<input type="checkbox"/> Up to \$2,600* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use – 11 U.S.C. § 507 (a)(7).	<input type="checkbox"/> Taxes or penalties owed to governmental units – 11 U.S.C. § 507 (a)(8).	<input type="checkbox"/> Other – Specify applicable paragraph of 11 U.S.C. § 507 (a)(____). \$ _____
*Amounts are subject to adjustment on 4/1/13 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.		
6. Credits. The amount of all payments on this claim has been credited for the purpose of making this proof of claim. (See instruction #6)		



7. Documents: Attached are redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. If the claim is secured, box 4 has been completed, and redacted copies of documents providing evidence of perfection of a security interest are attached. (See instruction #7, and the definition of "redacted".)

DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.

If the documents are not available, please explain:

8. Signature: (See instruction #8)

Check the appropriate box.

- I am the creditor. I am the creditor's authorized agent. I am the trustee, or the debtor, or their authorized agent. I am a guarantor, surety, indorser, or other codebtor.
- (Attach copy of power of attorney, if any.) (See Bankruptcy Rule 3004.) (See Bankruptcy Rule 3005.)

I declare under penalty of perjury that the information provided in this claim is true and correct to the best of my knowledge, information, and reasonable belief.

Print Name: Joseph M. Endry

Title: _____

Company: _____

Address and telephone number (if different from notice address above): _____

(Signature)

05/09/2012
(Date)

Telephone number: (850) 435-5300 email: joe@ioeendry

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

INSTRUCTIONS FOR PROOF OF CLAIM FORM

The instructions and definitions below are general explanations of the law. In certain circumstances, such as bankruptcy cases not filed voluntarily by the debtor, exceptions to these general rules may apply.

Items to be completed in Proof of Claim form

Court, Name of Debtor, and Case Number:

Fill in the federal judicial district in which the bankruptcy case was filed (for example, Central District of California), the debtor's full name, and the case number. If the creditor received a notice of the case from the bankruptcy court, all of this information is at the top of the notice.

Creditor's Name and Address:

Fill in the name of the person or entity asserting a claim and the name and address of the person who should receive notices issued during the bankruptcy case. A separate space is provided for the payment address if it differs from the notice address. The creditor has a continuing obligation to keep the court informed of its current address. See Federal Rule of Bankruptcy Procedure (FRBP) 2002(g).

1. Amount of Claim as of Date Case Filed:

State the total amount owed to the creditor on the date of the bankruptcy filing. Follow the instructions concerning whether to complete items 4 and 5. Check the box if interest or other charges are included in the claim.

2. Basis for Claim:

State the type of debt or how it was incurred. Examples include goods sold, money loaned, services performed, personal injury/wrongful death, car loan, mortgage note, and credit card. If the claim is based on delivering health care goods or services, limit the disclosure of the goods or services so as to avoid embarrassment or the disclosure of confidential health care information. You may be required to provide additional disclosure if an interested party objects to the claim.

3. Last Four Digits of Any Number by Which Creditor Identifies Debtor:

State only the last four digits of the debtor's account or other number used by the creditor to identify the debtor.

3a. Debtor May Have Scheduled Account As:

Report a change in the creditor's name, a transferred claim, or any other information that clarifies a difference between this proof of claim and the claim as scheduled by the debtor.

3b. Uniform Claim Identifier:

If you use a uniform claim identifier, you may report it here. A uniform claim identifier is an optional 24-character identifier that certain large creditors use to facilitate electronic payment in chapter 13 cases.

4. Secured Claim:

Check whether the claim is fully or partially secured. Skip this section if the claim is entirely unsecured. (See Definitions.) If the claim is secured, check the box for the nature and value of property that secures the claim, attach copies of lien documentation, and state, as of the date of the bankruptcy filing, the annual interest rate (and whether it is fixed or variable), and the amount past due on the claim.

5. Amount of Claim Entitled to Priority Under 11 U.S.C. § 507 (a).

If any portion of the claim falls into any category shown, check the appropriate box(es) and state the amount entitled to priority. (See Definitions.) A claim may be partly priority and partly non-priority. For example, in some of the categories, the law limits the amount entitled to priority.

6. Credits:

An authorized signature on this proof of claim serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

7. Documents:

Attach redacted copies of any documents that show the debt exists and a lien secures the debt. You must also attach copies of documents that evidence perfection of any security interest. You may also attach a summary in addition to the documents themselves. FRBP 3001(c) and (d). If the claim is based on delivering health care goods or services, limit disclosing confidential health care information. Do not send original documents, as attachments may be destroyed after scanning.

8. Date and Signature:

The individual completing this proof of claim must sign and date it. FRBP 9011. If the claim is filed electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what constitutes a signature. If you sign this form, you declare under penalty of perjury that the information provided is true and correct to the best of your knowledge, information, and reasonable belief. Your signature is also a certification that the claim meets the requirements of FRBP 9011(b). Whether the claim is filed electronically or in person, if your name is on the signature line, you are responsible for the declaration. Print the name and title, if any, of the creditor or other person authorized to file this claim. State the filer's address and telephone number if it differs from the address given on the top of the form for purposes of receiving notices. If the claim is filed by an authorized agent, attach a complete copy of any power of attorney, and provide both the name of the individual filing the claim and the name of the agent. If the authorized agent is a servicer, identify the corporate servicer as the company. Criminal penalties apply for making a false statement on a proof of claim.

DEFINITIONS**INFORMATION****Debtor**

A debtor is the person, corporation, or other entity that has filed a bankruptcy case.

Creditor

A creditor is a person, corporation, or other entity to whom debtor owes a debt that was incurred before the date of the bankruptcy filing. See 11 U.S.C. §101 (10).

Claim

A claim is the creditor's right to receive payment for a debt owed by the debtor on the date of the bankruptcy filing. See 11 U.S.C. §101 (5). A claim may be secured or unsecured.

Proof of Claim

A proof of claim is a form used by the creditor to indicate the amount of the debt owed by the debtor on the date of the bankruptcy filing. The creditor must file the form with the clerk of the same bankruptcy court in which the bankruptcy case was filed.

Secured Claim Under 11 U.S.C. § 506 (a)

A secured claim is one backed by a lien on property of the debtor. The claim is secured so long as the creditor has the right to be paid from the property prior to other creditors. The amount of the secured claim cannot exceed the value of the property. Any amount owed to the creditor in excess of the value of the property is an unsecured claim. Examples of liens on property include a mortgage on real estate or a security interest in a car. A lien may be voluntarily granted by a debtor or may be obtained through a court proceeding. In some states, a court judgment is a lien.

A claim also may be secured if the creditor owes the debtor money (has a right to setoff).

Unsecured Claim

An unsecured claim is one that does not meet the requirements of a secured claim. A claim may be partly unsecured if the amount of the claim exceeds the value of the property on which the creditor has a lien.

Claim Entitled to Priority Under 11 U.S.C. § 507 (a)

Priority claims are certain categories of unsecured claims that are paid from the available money or property in a bankruptcy case before other unsecured claims.

Redacted

A document has been redacted when the person filing it has masked, edited out, or otherwise deleted, certain information. A creditor must show only the last four digits of any social-security, individual's tax-identification, or financial-account number, only the initials of a minor's name, and only the year of any person's date of birth. If the claim is based on the delivery of health care goods or services, limit the disclosure of the goods or services so as to avoid embarrassment or the disclosure of confidential health care information.

Evidence of Perfection

Evidence of perfection may include a mortgage, lien, certificate of title, financing statement, or other document showing that the lien has been filed or recorded.

Acknowledgment of Filing of Claim

To receive acknowledgment of your filing, you may either enclose a stamped self-addressed envelope and a copy of this proof of claim or you may access the court's PACER system (www.pacer.psc.uscourts.gov) for a small fee to view your filed proof of claim.

Offers to Purchase a Claim

Certain entities are in the business of purchasing claims for an amount less than the face value of the claims. One or more of these entities may contact the creditor and offer to purchase the claim. Some of the written communications from these entities may easily be confused with official court documentation or communications from the debtor. These entities do not represent the bankruptcy court or the debtor. The creditor has no obligation to sell its claim. However, if the creditor decides to sell its claim, any transfer of such claim is subject to FRBP 3001(e), any applicable provisions of the Bankruptcy Code (11 U.S.C. § 101 *et seq.*), and any applicable orders of the bankruptcy court.

A. U.S. DEPARTMENT OF HOUSING & URBAN DEVELOPMENT SETTLEMENT STATEMENT	B. TYPE OF LOAN:				
	1. <input type="checkbox"/> FHA	2. <input type="checkbox"/> FmHA	3. <input checked="" type="checkbox"/> CONV. UNINS.	4. <input type="checkbox"/> VA	5. <input type="checkbox"/> CONV. INS.
	6. FILE NUMBER: 06-139			7. LOAN NUMBER:	
	8. MORTGAGE INS CASE NUMBER:				

C. NOTE: *This form is furnished to give you a statement of actual settlement costs. Amounts paid to and by the settlement agent are shown. Items marked "[POC]" were paid outside the closing; they are shown here for informational purposes and are not included in the totals.*
1.0 3/98 (06-139/06-139/11)

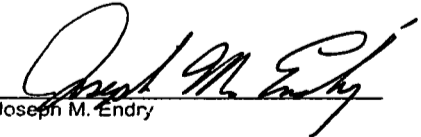
D. NAME AND ADDRESS OF BUYER: Joseph M. Endry 4403 Soundside Drive Gulf Breeze, FL 32563	E. NAME AND ADDRESS OF SELLER: The Cliffs at Glassy, Inc. 3598 Hwy. 11 Travelers Rest, SC 29690	F. NAME AND ADDRESS OF LENDER:
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G. PROPERTY LOCATION: Lot 18A, Cliffs Valley, Stone Creek, III Travelers Rest, SC 29690 Greenville County, South Carolina	H. SETTLEMENT AGENT: 56-2118702 Jeffrey H. Gray, Esq. PLACE OF SETTLEMENT 1710 Highway 11 Landrum, SC 29356	I. SETTLEMENT DATE: May 30, 2006
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J. SUMMARY OF BUYER'S TRANSACTION	
100. GROSS AMOUNT DUE FROM BUYER:	
101. Contract Sales Price	392,000.00
102. Personal Property	
103. Settlement Charges to Buyer (Line 1400)	1,449.34
104.	
105.	
<i>Adjustments For Items Paid By Seller in advance</i>	
106. City/town Taxes to	
107. County Taxes to	
108. Homeowner's Dues 05/30/06 to 01/01/07	384.66
109.	
110. Family Membership	50,000.00
111. Golf Membership	50,000.00
112.	
120. GROSS AMOUNT DUE FROM BUYER	493,834.00
200. AMOUNTS PAID BY OR IN BEHALF OF BUYER:	
201. Deposit or earnest money	5,000.00
202. Principal Amount of New Loan(s)	
203. Existing loan(s) taken subject to	
204.	
205.	
206.	
207.	
208.	
209.	
<i>Adjustments For Items Unpaid By Seller</i>	
210. City/town Taxes to	
211. County Taxes 01/01/06 to 05/30/06	2,342.36
212. Homeowner's Dues to	
213. Prepaid Interest	51,714.00
214.	
215.	
216.	
217.	
218.	
219.	
220. TOTAL PAID BY/FOR BUYER	59,056.36
300. CASH AT SETTLEMENT FROM/TO BUYER:	
301. Gross Amount Due From Buyer (Line 120)	493,834.00
302. Less Amount Paid By/For Buyer (Line 220)	(59,056.36)
303. CASH (X FROM) (TO) BUYER	434,777.64

K. SUMMARY OF SELLER'S TRANSACTION	
400. GROSS AMOUNT DUE TO SELLER:	
401. Contract Sales Price	392,000.00
402. Personal Property	
403.	
404.	
405.	
<i>Adjustments For Items Paid By Seller in advance</i>	
406. City/town Taxes to	
407. County Taxes to	
408. Homeowner's Dues 05/30/06 to 01/01/07	384.66
409.	
410. Family Membership	50,000.00
411. Golf Membership	50,000.00
412.	
420. GROSS AMOUNT DUE TO SELLER	492,384.66
500. REDUCTIONS IN AMOUNT DUE TO SELLER:	
501. Excess Deposit (See Instructions)	
502. Settlement Charges to Seller (Line 1400)	164,112.58
503. Existing loan(s) taken subject to	
504. Payoff of first Mortgage	
505. Payoff of second Mortgage	
506.	
507. (Deposit disb. as proceeds)	
508.	
509.	
<i>Adjustments For Items Unpaid By Seller</i>	
510. City/town Taxes to	
511. County Taxes 01/01/06 to 05/30/06	2,342.36
512. Homeowner's Dues to	
513. Prepaid Interest	51,714.00
514.	
515.	
516.	
517.	
518.	
519.	
520. TOTAL REDUCTION AMOUNT DUE SELLER	218,168.94
600. CASH AT SETTLEMENT TO/FROM SELLER:	
601. Gross Amount Due To Seller (Line 420)	492,384.66
602. Less Reductions Due Seller (Line 520)	(218,168.94)
603. CASH (X TO) (FROM) SELLER	274,215.72

The undersigned hereby acknowledge receipt of a completed copy of pages 1&2 of this statement & any attachments referred to herein.

Buyer 
 Joseph M. Endry

Seller The Cliffs at Glassy, Inc.

 BY: _____
 Its Authorized Representative

L. SETTLEMENT CHARGES

		PAID FROM BUYER'S FUNDS AT SETTLEMENT	PAID FROM SELLER'S FUNDS AT SETTLEMENT
700. TOTAL COMMISSION Based on Price	\$ 336,286.00 @ 9.0000 %	30,265.74	
<i>Division of Commission (line 700) as Follows:</i>			
701. \$ 23,540.02	to Cliffs Real Estate, Inc.		
702. \$ 6,725.72	to IMI Resort Properties, LLC		
703. Commission Paid at Settlement			30,265.74
704. 3% Broker Referral	to Coldwell Banker JME Realty		10,088.58
800. ITEMS PAYABLE IN CONNECTION WITH LOAN			
801. Loan Origination Fee	% to		
802. Loan Discount	% to		
803. Appraisal Fee	to		
804. Credit Report	to		
805. Lender's Inspection Fee	to		
806. Wire Fee	to		
807. Assumption Fee	to		
808.			
809.			
810.			
811.			
900. ITEMS REQUIRED BY LENDER TO BE PAID IN ADVANCE			
901. Interest From	to @ \$ /day (days %)		
902. Mortgage Insurance Premium for	months to		
903. Hazard Insurance Premium for	1.0 years to		
904.			
905.			
1000. RESERVES DEPOSITED WITH LENDER			
1001. Hazard Insurance	months @ \$ per month		
1002. Mortgage Insurance	months @ \$ per month		
1003. City/town Taxes	months @ \$ per month		
1004. County Taxes	months @ \$ per month		
1005. Homeowner's Dues	months @ \$ per month		
1006.	months @ \$ per month		
1007.	months @ \$ per month		
1008.	months @ \$ per month		
1100. TITLE CHARGES			
1101. Commercial Carrier	to Pinnacle Title Agency		
1102. Postage, Copies, Fax	to Pinnacle Title Agency		
1103. Abstract or Title Search	to Pinnacle Title Agency		
1104. Title Insurance Binder	to Pinnacle Title Agency		
1105. Title Insurance Binder-Owners	to Pinnacle Title Agency	50.00	
1106. Document Preparation	to Pinnacle Title Agency		
1107. Attorney's Fees	to Jeffrey H. Gray, P.C.	495.00	195.00
<i>(includes above item numbers:)</i>			
1108. Title Insurance	to Pinnacle Title Agency	786.00	
<i>(includes above item numbers:)</i>			
1109. Lender's Coverage	\$		
1110. Owner's Coverage	\$ 392,000.00	786.00	
1111. Utilities Installation Fee	to Valley Water Escrow Fund		1,250.00
1112. Utilities Installation Fee	to Valley Road Escrow Fund		2,500.00
1113. POA Capital Contribution/2 mos	to Cliffs Valley Homeowners Assoc. Reserve	108.34	
1114.			
1115. Release Fee			
1116.			
1117. Contribution	to The Cliffs Charity Fund		3,362.86
1118.	Jeffrey H. Gray, P.C.		
1200. GOVERNMENT RECORDING AND TRANSFER CHARGES			
1201. Recording Fees: Deed \$ 10.00; Mortgage \$; Releases \$		10.00	
1202. City/County Tax/Stamps: Deed ; Mortgage			
1203. State Tax/Stamps: Revenue Stamps 1,450.40; Mortgage			1,450.40
1204.			
1205.			
1300. ADDITIONAL SETTLEMENT CHARGES			
1301. Survey	to		
1302. Pest Inspection	to		
1303. Family Membership	to Cliffs Golf & Country Club		50,000.00
1304. Golf Membership	to Cliffs Golf & Country Club		50,000.00
1305. Prepaid Club Credit	to Cliffs Golf & Country Club		15,000.00
1400. TOTAL SETTLEMENT CHARGES (Enter on Lines 103, Section J and 502, Section K)		1,449.34	164,112.58

By signing page 1 of this statement, the signatories acknowledge receipt of a completed copy of page 2 of this two page statement.

Jeffrey H. Gray, P.C.
Settlement Agent

Certified to be a true copy

I am enclosing 2 claims.

One as a golf member
& the initiation deposit.

The other as a noteholder
& the dues & interest
not paid. Also sending
reg. mail.

Yours,

Wm. E. Eddy

**GOLDWELL
BANKER**

NAME DEBIT



Mr. Joseph M. Endry
123 Palatka Pl
Pensacola FL 32502-5629

BMC GROUP INC

Attn: Cliff Lewis Processing
18675 1st Street East

Chickasha, MN 55317-3020

EXTREMELY URGENT

Please Rush To Addressee

Schedule package pickup right from your home or office at usps.com/pickup

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Label 118, March 2004

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	<input type="checkbox"/> Next <input type="checkbox"/> 2nd <input type="checkbox"/> 2nd lat Day	\$	\$	\$
Date Accepted	Scheduled Date of Delivery	COD Fee	Total Postage & Fees	Acceptance Emp. Initials
Mo. Day Year	Month Day	\$	\$	
Time Accepted	Scheduled Time of Delivery	Insurance Fee		
Mo. Day Year	Month Day	\$		
Flat Rate <input type="checkbox"/> or Weight	Military <input type="checkbox"/> Noon <input checked="" type="checkbox"/> 3 PM			
lbs. ozs.	2nd Day <input type="checkbox"/> 3rd Day <input type="checkbox"/> Intl Alpha Country Code			

DELIVERY (POSTAL SERVICE USE ONLY)

Delivery Attempt	Time	Employee Signature
Mo. Day	Mo. Day	Mo. Day
Delivery Attempt	Time	Employee Signature
Mo. Day	Mo. Day	Mo. Day
Delivery Date	Time	Employee Signature
Mo. Day	Mo. Day	Mo. Day

CUSTOMER USE ONLY

NO DELIVERY (Today) (Holiday)

WAVER OF SIGNATURE (Domestic Mail Only)
Additional insurance is void if the recipient's signature is not provided. If the recipient's signature is not provided, the carrier is not responsible for delivery. The carrier is not responsible for delivery if the recipient's signature is not provided. The carrier is not responsible for delivery if the recipient's signature is not provided.

MAY 15 2012

RECEIVED

FROM: (PLEASE PRINT)

PHONE ()

BMC GROUP

JOSEPH EMBURY
125 PARKWAY 11,
TAMPA, FL 33604

TO: (PLEASE PRINT)

BMC GROUP

FOR INTERNATIONAL DESTINATIONS, WRITE COUNTRY NAME BELOW.

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