

UNITED STATES BANKRUPTCY COURT FOR THE NORTHERN DISTRICT OF TEXAS		PROOF OF CLAIM
Name of Debtor: (Check Only One): <input type="checkbox"/> Opus West Corporation <input checked="" type="checkbox"/> Opus West Construction Corporation <input type="checkbox"/> O.W. Commercial, Inc. <input type="checkbox"/> Opus West LP <input type="checkbox"/> Opus West Partners, Inc.		Case Number: <p style="text-align: center; font-size: 1.2em;">09-34334</p>
NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. All other requests for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.		
Name of Creditor (the person or other entity to whom the debtor owes money or property): <p style="text-align: center; font-size: 1.2em;">GENERAL COATINGS CORPORATION</p>		<input type="checkbox"/> Check this box to indicate that this claim amends a previously filed claim. Court Claim Number: <i>(If known)</i> Filed on: _____
Name and address where notices should be sent: <p style="text-align: center;">Lee A. Morrison, Esq., 530 "B" Street, Suite 1410 San Diego, California 92101-4479 Telephone number: (619) 235-2133 Email Address: lamlaw@msn.com</p>		<input type="checkbox"/> Check this box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check this box if you are the debtor or trustee in this case.
Name and address where payment should be sent (if different from above): <p style="text-align: center;">Lee A. Morrison, Esq. [address listed above]</p>		
1. Amount of Claim as of Date Case Filed: \$ <u>34,364.00</u> BMC GROUP If all or part of your claim is secured, complete item 4 below; however, if all of your claim is unsecured, do not complete item 4. If all or part of your claim is entitled to priority, complete item 5. <input type="checkbox"/> Check this box if claim includes interest or other charges in addition to the principal amount of claim. Attach itemized statement of interest or charges.		5. Amount of Claim Entitled to Priority under 11 U.S.C. §507(a). If any portion of your claim falls in one of the following categories, check the box and state the amount. Specify the priority of the claim. <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 \$10,950) earned within 180 days before filing of the bankruptcy petition or cessation of the debtor's business, 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). <input type="checkbox"/> Up to \$2,425 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)(). Amount entitled to priority: <p style="text-align: center;">\$ _____</p>
2. Basis for Claim: <u>goods and services</u> (See instruction #2 on reverse side.)		
3. Last four digits of any number by which creditor identifies debtor: <u>0024</u> 3a. Debtor may have scheduled account as: _____ (See instruction §3a on reverse side).		
4. Secured Claim (See instruction #4 on reverse side.) Check the appropriate box if your claim is secured by a lien on property or a right of setoff and provide the requested information. Nature of property or right of setoff: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Equipment <input type="checkbox"/> Other Value of Property: \$ _____ Annual Interest Rate _____ % Amount of arrearage and other charges as of time case filed included in secured claim, if any: \$ _____ Basis for perfection: _____ Amount Unsecured: \$ _____		
6. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim. 7. Documents: Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements or running accounts, contracts, judgments, mortgages, and security agreements. You may also attach a summary. Attach redacted copies of documents providing evidence of perfection of a security interest. You may also attach a summary. (See instruction 7 and definition of "redacted" on reverse side.) DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING. If the documents are not available, please explain: _____		
Date: <p style="font-size: 1.5em;">8/31/09</p>	Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of power of attorney, if any. 	
		FOR COURT USE ONLY

RECORDED APR 27 2009

DOC# 2009-0194904



APR 16, 2009 11:34 AM

RECORDING REQUESTED BY & MAIL TO:

NAME General Coatings Corporation

STREET ADDRESS 6711 Nancy Ridge Drive

CITY, STATE & ZIP CODE San Diego, CA 92121 (8D-038)

OFFICIAL RECORDS
SAN DIEGO COUNTY RECORDER'S OFFICE
DAVID L. BUTLER, COUNTY RECORDER
FEES: 10.00

PAGES: 1



Space above this line for Recorder's use

STATE OF CALIFORNIA MECHANIC'S LIEN
(Claim of Lien - Civil Code Section 3084)

The undersigned, General Coatings Corporation

(FULL NAME OF PERSON OR FIRM CLAIMING MECHANIC'S LIEN - CONTRACTORS USE NAME EXACTLY AS IT APPEARS ON CONTRACTOR'S LICENSE)

referred to in this Claim of Lien as the Claimant, claims a mechanic's lien for the labor, services, equipment and/or materials described below, furnished for a work of improvement upon that certain real-property located in the City of Carlsbad, County of San Diego, State of California and described as follows: Opus Point IV, 3193/3197 Lionshead Avenue, Carlsbad, CA 92010

(DESCRIPTION OF PROPERTY WHERE THE WORK AND/OR MATERIALS WERE FURNISHED.
ALTHOUGH THE STREET ADDRESS ALONE IS SUFFICIENT, IT IS RECOMMENDED TO GIVE BOTH THE STREET ADDRESS AND LEGAL DESCRIPTION.)

After deducting all just credits and offsets, the sum of \$ 4,985.51

(AMOUNT OF CLAIM DUE AND UNPAID)

together with interest thereon at the rate of 18 percent per annum from April 16, 2009 is due

(DATE WHEN AMOUNT OF CLAIM BECAME DUE)

Claimant for the following labor, services, equipment and/or materials furnished by Claimant:

Painting, Wallcovering, Labor & Materials

GENERAL DESCRIPTION OF THE WORK AND/OR MATERIALS FURNISHED)

The name of the person or company by whom Claimant was employed, or to whom Claimant furnished the labor, services, equipment and/or materials is Opus West Construction Corporation

(USUALLY NAME OF PERSON OR FIRM WHO ORDERED FROM, OR CONTRACTED WITH, CLAIMANT FOR THE WORK AND/OR MATERIALS)

The name(s) and address(es) of the owner(s) or reputed owner(s) of the real property is/are:

Opus West Corporation, 2050 Main Street, #800, Irvine, CA 92614

(THIS INFORMATION CAN BE OBTAINED FROM THE COUNTY ASSESSOR'S OFFICE WHERE THE REAL PROPERTY IS LOCATED)

Name of Claimant General Coatings Corporation

Executed on April 16, 2009 at San Diego, CA

by Janet Reynolds

(PRINT NAME)

(SIGNATURE)

VERIFICATION

I, the undersigned, declare: I am the Project Accountant of General Coatings Corporation

(TITLE)

(NAME OF CLAIMANT)

the Claimant named in the foregoing claim of mechanic's lien; I am authorized to make this Verification for the Claimant; I have read the foregoing claim of mechanic's lien and know the contents thereof, and the same is true to my own knowledge.

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

Executed on April 16, 2009 at San Diego, CA

(DATE)

(CITY AND STATE WHERE SIGNED AND VERIFIED)

By Kathy Farrington

(PRINT NAME)

(SIGNATURE)

EXHIBIT A

F8
IP
con

COPY

THE ORIGINAL OF THIS DOCUMENT
WAS RECORDED ON JUN 17, 2009
DOCUMENT NUMBER 2009-0329195
DAVID L. BUTLER, COUNTY RECORDER
SAN DIEGO COUNTY RECORDER'S OFFICE
TIME: 9:46 AM

RECORDING REQUESTED BY & MAIL TO:

NAME General Coatings Corporation

STREET ADDRESS 6711 Nancy Ridge Drive

CITY, STATE & ZIP CODE San Diego, CA 92124 #8D-024

Space above this line for recorder's use

STATE OF CALIFORNIA MECHANIC'S LIEN
(Claim of Lien - Civil Code Section 3084)

The undersigned, General Coatings Corporation

(FULL NAME OF PERSON OR FIRM CLAIMING MECHANIC'S LIEN - CONTRACTORS USE NAME EXACTLY AS IT APPEARS ON CONTRACTOR'S LICENSE)

referred to in this Claim of Lien as the Claimant, claims a mechanic's lien for the labor, services, equipment and/or materials described below, furnished for a work of improvement upon that certain real property located in the City of San Diego, County of San Diego, State of California and described as follows: Horizon Tech, 10301 Meanly Drive, San Diego, CA 92131

(DESCRIPTION OF PROPERTY WHERE THE WORK AND/OR MATERIALS WERE FURNISHED.
ALTHOUGH THE STREET ADDRESS ALONE IS SUFFICIENT, IT IS RECOMMENDED TO GIVE BOTH THE STREET ADDRESS AND LEGAL DESCRIPTION.)

After deducting all just credits and offsets, the sum of \$ 28,618.70

(AMOUNT OF CLAIM DUE AND UNPAID)

together with interest thereon at the rate of 18 percent per annum from June 16, 2009 is due

(DATE WHEN AMOUNT OF CLAIM BECAME DUE)

Claimant for the following labor, services, equipment and/or materials furnished by Claimant:

Painting, Wallcovering, labor & materials

GENERAL DESCRIPTION OF THE WORK AND/OR MATERIALS FURNISHED)

The name of the person or company by whom Claimant was employed, or to whom Claimant furnished the labor, services, equipment and/or materials is Opus West Construction Corp.

(USUALLY NAME OF PERSON OR FIRM WHO ORDERED FROM, OR CONTRACTED WITH, CLAIMANT FOR THE WORK AND/OR MATERIALS)

The name(s) and address(es) of the owner(s) or reputed owner(s) of the real property is/are:

Opus West Corporation, 2555 E. Camelback Rd., Ste 800, Phoenix, AZ 85016

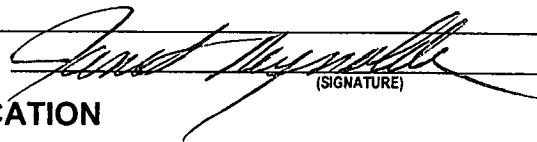
(THIS INFORMATION CAN BE OBTAINED FROM THE COUNTY ASSESSOR'S OFFICE WHERE THE REAL PROPERTY IS LOCATED)

Name of Claimant General Coatings Corporation

Executed on 6-16-09 at San Diego, CA

by Janet Reynolds, Corp. Secretary

(PRINT NAME)


(SIGNATURE)

VERIFICATION

I, the undersigned, declare: I am the Project Acct. of General Coatings Corporation

(TITLE)

(NAME OF CLAIMANT)

the Claimant named in the foregoing claim of mechanic's lien; I am authorized to make this Verification for the Claimant; I have read the foregoing claim of mechanic's lien and know the contents thereof, and the same is true to my own knowledge.

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

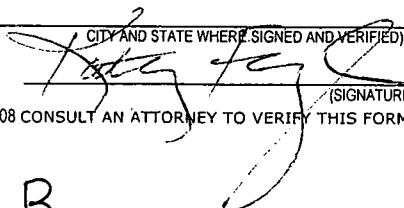
Executed on 6-16-09 at San Diego, CA

(DATE)

CITY AND STATE WHERE SIGNED AND VERIFIED)

By Kathy Farrington

(PRINT NAME)


(SIGNATURE)

www.TheContractorsGroup.com & Diane Dennis Enterprises © 2005-2008 mcln-001.doc Rev. 01/08 CONSULT AN ATTORNEY TO VERIFY THIS FORM'S FITNESS FOR YOUR PURPOSE.

EXHIBIT B

PROOF OF SERVICE

I, Deborah Seiter, declare as follows:

I am employed in San Diego County, over 18 years of age, and not a party to the within action. My business address is Law Office of Lee A. Morrison, 530 "B" Street, Suite 1410, San Diego, CA 92101.

On August 31, 2009, I served the document(s) described as:

■ **Proof of Claim re Debtor: Opus West Construction Corporation**

on interested parties in this action as follows: **SEE SERVICE LIST ATTACHED**

BY U.S. MAIL: By placing a true and correct copy thereof enclosed in a sealed envelope addressed as above, with postage thereon fully prepaid, in the U.S. Mail at San Diego California. I am readily familiar with the firm's practice of collecting and processing correspondence for mailing. Under that practice it would be deposited with U.S. Postal Service on the same day with postage thereon fully prepaid at San Diego, California, in the ordinary course of business. I am aware that on motion of the party served, service is presumed invalid if postal cancellation date or postage meter date is more than one day after date of deposit for mailing as stated in the affidavit.

BY OVERNIGHT COURIER: I caused the above-referenced document(s) to be delivered to _____ for delivery to the address(es) attached.

BY FAX: By transmitting a true copy of the above document(s) to the persons and fax numbers shown on the attached service list, at _____ a.m./p.m. on this date, from facsimile machine number (619) 235-4508. The transmission was reported as complete and without error. A true copy of the transmission report, properly issued by the transmitting facsimile machine, is attached hereto.

[State] I certify under penalty of perjury that the foregoing is true and correct.

[Federal] I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

Executed on August 31, 2009, at San Diego, California.

Deborah Seiter
DEBORAH SEITER

Lee A. Morrison
530 "B" Street, Suite 1410
San Diego, CA 92101-4479
(619) 235-2133

ATTACHMENT TO PROOF OF SERVICE

SERVICE LIST

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28

Opus West Corporation, et al.
c/o BMC Group
P.O. Box 3020
Chanhassen, MN 55317-3020

Lee A. Morrison
530 "B" Street, Suite 1410
San Diego, CA 92101-4479
(619) 235-2133