

UNITED STATES BANKRUPTCY COURT
MIDDLE DISTRICT OF FLORIDA
JACKSONVILLE DIVISION

PROOF OF CLAIM

In re:
TAYLOR, BEAN & WHITAKER MORTGAGE CORP.

Case Number:
3:09-bk-07047-JAF

NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A "request" for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.

Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.

Name of Creditor and Address: the person or other entity to whom the debtor owes money or property. If necessary, please cross out pre-printed address and write in change of address.

**JANICE G. DUNSWORTH
13394 S.E. 86TH CIRCLE
SUMMERFIELD, FLORIDA 34491**

**CLAIM FILED
JUN 15 2010**

CLERK, U. S. BANKRUPTCY COURT
MIDDLE DISTRICT OF FLORIDA

If you have already filed a proof of claim with the Bankruptcy Court or BMC, you do not need to file again.

THIS SPACE IS FOR COURT USE ONLY

Creditor Telephone Number (352) 307-2916 Check box if address is where Notice is to be sent.

Name and address where payment should be sent (if different from above):

Check this box if you are the debtor or trustee in this case.

Check this box to indicate that this claim amends a previously filed claim.

Claim Number (if known):

Filed on: _____

1. AMOUNT OF CLAIM AS OF DATE CASE FILED \$ **1,036.15**

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.

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.

2. BASIS FOR CLAIM:
EMPLOYEE STOCK OWNERSHIP PLAN

(See instructions #2 and #3a on reverse side.)

3. LAST FOUR DIGITS OF ANY NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR:

3a. Debtor may have scheduled account as: _____

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 set off and provide the requested information

Secured Claim Amount: \$ _____

DO NOT include the priority portion of your claim here.

Nature of property or right of setoff:

Unsecured Claim Amount: \$ _____

Amount of arrearage and other charges as of time case filed included in secured claim.

Describe:

Real Estate Motor Vehicle Other _____

Value of Property: \$ _____ Annual Interest Rate: _____ % if any: \$ _____ Basis for Perfection: _____

5. PRIORITY CLAIM

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.

Unsecured Priority Claim Amount: \$ **1,036.15**

Include **ONLY** the priority portion of your unsecured claim here.

You **MUST** specify the priority of the claim:

Domestic support obligations under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).

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).

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).

Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8).

Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(5).

Other - Specify applicable paragraph of 11 U.S.C. § 507(a) (_____).

* Amounts are subject to adjustment on 4/1/10 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.

7. SUPPORTING DOCUMENTS: Attach redacted copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, mortgages, and security agreements. You may also attach a summary. Attach redacted copies of evidence of perfection of a security interest. (See definition of "redacted" on reverse side.) If the documents are not available, please explain.

DATE-STAMPED COPY To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.

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

The original of this completed proof of claim form must be sent by mail, hand, courier or overnight delivery (facsimile, telecopy or other electronic means NOT accepted), so that it is actually received on or before 5:00 p.m. prevailing Eastern Time on June 15, 2010, the Bar Date (as defined in the Bar Date Notice).

THIS SPACE FOR COURT USE ONLY

By Regular Mail to:
BMC Group, Inc.
Attn: Taylor, Bean & Whitaker Mortgage Corp. Claim Processing
PO Box 3020
Chanhausen, MN 55317-3020

By Hand, Courier, Or Overnight Delivery to:
BMC Group, Inc.
Attn: Taylor, Bean & Whitaker Mortgage Corp. Claim Proce
18750 Lake Drive East
Chanhausen, MN 55317

T, B & W Mortgage Corp.



03078

DATE
06/14/10

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.

Janice A. Dunsworth
JANICE G. DUNSWORTH

Penalty for presenting fraudulent claim is a fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 AND 3571.

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10/20/08

Re: TARES, BENEFCIARY?



**Taylor, Bean & Whitaker
Mortgage Corp.**

315 N.E. 14th Street
Ocala, Florida 34470

TO: Former Employees of Taylor, Bean & Whitaker Mortgage Corp.
("TB&W") who were eligible participants of the Taylor, Bean & Whitaker
Employee Stock Ownership Plan ("ESOP" or "Plan")

FROM: Taylor, Bean & Whitaker Employee Stock Ownership Plan Administrative
Committee (the "Plan Administrative Committee")

DATE: October 15, 2008

Re: Employee Rollout of Taylor, Bean & Whitaker Employee Stock
Ownership Plan

You are receiving this message because as a former employee of TB&W you may have a vested interest in the TB&W ESOP. We are providing the following important information to you in connection with your rights and interests in the ESOP.

Your rights under the ESOP are governed by the Plan documents. A Summary Plan Description which summarizes the eligibility and vesting rights with respect to the Plan and provides answers to some of the most frequently asked questions is enclosed herewith. The Summary Plan Description will answer most of your questions with respect to the Plan. A copy of the ESOP's Summary Annual Report is also enclosed for your review along with a Beneficiary Designation form which we request you fill out and complete and return to the Plan Administrative Committee as soon as possible.

The ESOP's plan year runs from November 1 to October 31, and the initial plan year ended October 31, 2007. For those employees who met the eligibility criteria to participate in the Plan as of October 31, 2007, a benefits statement showing what benefits you had in the Plan as of that date is enclosed herewith. The next plan year ends October 31, 2008, and additional benefit statements will be distributed when they become available.

As former employees of TB&W, you will be entitled to a distribution of any vested benefits you have in the Plan within the time frames set forth in the Plan. You will receive additional communications from the Plan Administrative Committee as the time for making distribution elections approaches.

Should you have further questions with respect to your rights and interests in the Plan, please direct your questions to esop@taylorbean.com or by sending your written questions to the Plan Administrative Committee at 315 N.E. 14th Street, Ocala, Florida 34470. You may also leave a voicemail message for the Plan Administrative Committee by calling 352-671-0066.

5-5-09
LMTZ
3:35 PM

MAILED
BENEFICIARY
DESIGNATION
10/20/08

2 called 10-18-08 4:15 PM
left message to call
Re: TAXES, BENEFICIARY?

SEVERAL
EMAILS
NO REPLY

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**TAYLOR, BEAN & WHITAKER
EMPLOYEE STOCK OWNERSHIP PLAN
PARTICIPANT STATEMENT**

Name: DUNSWORTH, JANICE G

Vested Pct: 100.00%

Soc. Sec. No.: XXX-XX-1756

Fair Market Value: \$ 68.70

SUMMARY OF YOUR ACCOUNT BALANCE AS OF OCTOBER 31, 2007

EMPLOYER STOCK ACCOUNT:

Shares as of February 1, 2007	0.0000
Shares Contributed	15.0823
Shares Sold	0.0000
Shares Distributed	0.0000
Forfeitures	<u>0.0000</u>
 Total Shares as of October 31, 2007	 <u>15.0823</u>
 Total Vested Shares as of October 31, 2007	 <u>15.0823</u>

GRAND TOTALS - ALL ACCOUNTS:

Total Value of Stock \$ 68.70 x 15.0823	<u>\$ 1,036.15</u>
 Total Vested Value	 <u>\$ 1,036.15</u>

Please note that this statement is intended to be as accurate as possible. If an error has occurred in its preparation, the provisions of the plan document will govern and you will be entitled to a corrected statement. Please see the Plan Administrator if you believe an error exists.