
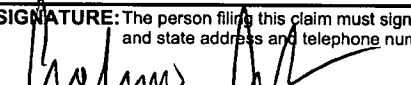


|  |  |   |  |
|--|--|---|--|
| <b>UNITED STATES BANKRUPTCY COURT<br/>MIDDLE DISTRICT OF FLORIDA<br/>JACKSONVILLE DIVISION</b>   |  | <b>PROOF OF CLAIM</b>   |  |
| In re:<br><b>TAYLOR, BEAN &amp; WHITAKER MORTGAGE CORP.</b>  |  | Case Number:<br><b>3:09-bk-07047-JAF</b>  |  |
| NOTE: This form should 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.  |  | <input type="checkbox"/> 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.<br><b>ANDREW PARKS<br/>JOY MELISSA PARKS<br/>3707 LANDER LANE<br/>COLORADO SPRINGS CO 80909</b>   |  | <b>CLAIM FILED</b><br><b>JUL 23 2010</b><br>CLERK, U.S. BANKRUPTCY COURT<br>MIDDLE DISTRICT OF FLORIDA  |  |
| Creditor Telephone Number (714) <b>570-9930</b> <input checked="" type="checkbox"/> Check box if address is where Notice is to be sent.  |  | <b>THIS SPACE IS FOR COURT USE ONLY</b>   |  |
| Name and address where payment should be sent (if different from above):   |  | <input checked="" type="checkbox"/> Check this box if you are the debtor or trustee in this case. <input type="checkbox"/> Check this box to indicate that this claim amends a previously filed claim.  |  |
| Payment Telephone Number ( )   |  | Claim Number (if known):<br>Filed on: _____   |  |
| 1. AMOUNT OF CLAIM AS OF DATE CASE FILED \$ <b>279.53</b><br>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.<br>If all or part of your claim is entitled to priority, complete item 5.<br><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.  |  |   |  |
| 2. BASIS FOR CLAIM:<br><b>CHECK RETURNED - INSUFFICIENT FUNDS</b>  |  | 3. LAST FOUR DIGITS OF ANY NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR: <b>1111</b><br>3a. Debtor may have scheduled account as: _____   |  |
| 4. SECURED CLAIM (See instruction #4 on reverse side.)<br>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<br><b>Nature of property or right of setoff:</b><br>Describe:<br><input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other _____<br>Value of Property: \$ _____ Annual Interest Rate: _____ % if any: \$ _____ Basis for Perfection: _____<br>Secured Claim Amount: \$ _____ <b>DO NOT</b> include the priority portion of your claim here.<br>Unsecured Claim Amount: \$ _____<br>Amount of arrearage and other charges as of time case filed included in secured claim, _____  |  |   |  |
| 5. PRIORITY CLAIM<br><input checked="" type="checkbox"/> 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: \$ <b>279.53</b> Include <b>ONLY</b> the priority portion of your unsecured claim here.<br><b>You MUST specify the priority of the claim:</b><br><input type="checkbox"/> Domestic support obligations under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). <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).<br><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"/> Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8).<br><input type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(5). <input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. § 507(a) ( _____ ).<br><small>* 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.</small> |  |   |  |
| 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: <b>Attach redacted copies of supporting documents</b> , 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.<br><b>DATE-STAMPED COPY</b> To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim. <b>DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.</b>  |  |   |  |
| 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).<br><b>By Regular Mail to:</b><br>BMC Group, Inc.<br>Attn: Taylor, Bean & Whitaker Mortgage Corp. Claim Processing<br>PO Box 3020<br>Chanhassen, MN 55317-3020  |  | <b>THIS SPACE FOR COURT USE ONLY</b><br>T, B & W Mortgage Corp.<br><br>03269   |  |
| <b>By Hand, Courier, Or Overnight Delivery to:</b><br>BMC Group, Inc.<br>Attn: Taylor, Bean & Whitaker Mortgage Corp. Claim Processing<br>18750 Lake Drive East<br>Chanhassen, MN 55317  |  |   |  |
| <b>DATE</b><br><b>7-15-2010</b>  |  | <b>SIGNATURE:</b> 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.<br> |  |

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.

EMAIL: ANMPARKS@GMAIL.COM

\*07100019\*  
09/03/2009  
6510057845

This is a LEGAL COPY of  
your check. You can still  
use the original check.

\*091000019\*  
09/03/2009  
3350409540  
This is a LEGAL COPY  
of your check. You can  
use it the same way  
you would use the  
original check.

RETURN REASON - A  
NOT SUFFICIENT  
FUNDS

TAYLOR, DEAN & WHITAKER  
1146 S. W. 10th St.  
Deer, Florida 34420  
Debit or Authorization Clearing Account

Pay to the order of  
Two Hundred Seventy Nine and 37/100

Return to:  
ANDREW PARKS & JOY PARKS  
10000 W. 10th St.  
COLUMBIA SPRINGS CO 80504  
310368982

Pay to the order of  
Account # 393652

000003670689676  
08/31/2009

RETURN REASON - A  
NOT SUFFICIENT FUNDS

NOT SUFFICIENT FUNDS

⑆07100019⑆ 09/03/2009 6510057845

⑆091000019⑆ 09/03/2009 3350409540

⑆071000301⑆ 09/03/2009 6214407124

⑆091000080⑆ 09/03/2009 6416250360

⑆091000019⑆ 09/03/2009 3350409540

⑆07100019⑆ 09/03/2009 6510057845

⑆091000019⑆ 09/03/2009 3350409540

⑆071000301⑆ 09/03/2009 6214407124

⑆091000080⑆ 09/03/2009 6416250360

⑆091000019⑆ 09/03/2009 3350409540

122105278 08/31/2009  
000003670689676  
\*071000301\* 09/01/2009  
6510057845

071000301 09/03/2009  
6214407124  
091000080 09/03/2009  
6416250360  
\*091000019\* 09/03/2009  
3350409540

Do not endorse or write below this line.

ENDORSE HERE

*Allyson*

*Spokane*

DO NOT WRITE, STAMP OR SIGN BELOW THIS LINE  
\*SIGNED HERE FOR MICR IDENTIFICATION\*

5817216769  
FRB-GHI 09032009  
09-01-09 101 4807 01

310368982  
719355623  
09032009  
0910-0030-1  
CHK# 7244 TRC=ZE45 PK=05

>01000019< 08/31/2009  
000003670689676

\*>01000019<\* 09/01/2009  
005817216769

Security Features:  
Bank MICR numbers • MICR routing and account numbers shown in blue on back  
Void Panograph • Void appears in body of check when photocopied or is used  
Warning Band • Border warning of security features