


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.		<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 <i>If necessary, please cross out pre-printed address and write in changes of address.</i>		CLAIM FILED JACKSONVILLE, FLORIDA SEP 13 2010 CLERK, U. S. BANKRUPTCY COURT MIDDLE DISTRICT OF FLORIDA	
SEAN IRELAND 1608 E COMANCHE AVE TAMPA, FL 33610		THIS SPACE IS FOR COURT USE ONLY	
Creditor Telephone Number (813) 205-5746 <input checked="" type="checkbox"/> Check box if address where notice is to be sent.		If you have already filed a proof of claim with the Bankruptcy Court or BMC, you do not need to file again.	
Name and address where payment should be sent (if different from above):		<input type="checkbox"/> Check this box to indicate that this claim amends a previously filed claim. Claim Number (if known): Filed on: _____	
<input type="checkbox"/> Check this box if you are the debtor or trustee in this case.			
Payment Telephone Number ()			
1. AMOUNT OF CLAIM AS OF DATE CASE FILED \$ <u>4,312.02</u>			
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.			
2. BASIS FOR CLAIM: <u>ESCROW ACCOUNT FUNDS</u>		3. LAST FOUR DIGITS OF ANY NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR: <u>2536</u> 3a. Debtor may have scheduled account as:	
(See Instructions #2 and #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 set off and provide the requested information		Secured Claim Amount: \$ <u>4,312.02</u> DO NOT include the priority portion of your claim here.	
Nature of property or right of setoff: Describe:		Unsecured Claim Amount: \$ _____	
<input checked="" type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other _____		Amount of arrearage and other charges as of time case filed included in secured claim,	
Value of Property: \$ _____ Annual Interest Rate: _____ % if any: \$ _____		Basis for Perfection: _____	
5. PRIORITY CLAIM			
<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: \$ <u>4,312.02</u> Include ONLY the priority portion of your unsecured claim here.	
You MUST 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"/> 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"/> 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).	
<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) (_____).	
* 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 Chanhassen, MN 55317-3020		By Hand, Courier, Or Overnight Delivery to: BMC Group, Inc. Attn: Taylor, Bean & Whitaker Mortgage Corp. Claim Processing 18750 Lake Drive East Chanhassen, MN 55317	
		T, B & W Mortgage Corp.  03285	
DATE <u>9/13/10</u>	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. <u>Sean Ireland</u> SEAN IRELAND		



Taylor, Bean & Whitaker
Perfecting the Art of Mortgage Lending

1417 North Magnolia Avenue
 Ocala, Florida 34475
 888 225-2164

MONTHLY BILLING STATEMENT

General Billing Info:

Statement Date: 07/14/2010
 Loan Number: 3442536
 Interest Rate: 5.500%
 Payment Due Date: 08/01/2010
 Regular Monthly Payment: \$1,418.55
 Total Payment(s) Due: \$1,418.55
 Unpaid Late Charges: \$0.00
 Unpaid NSF Fees: \$0.00
 Other Unpaid Fees/Charges: \$0.00
Total Due: \$1,418.55

Account Balances:

Principal Bal. on 07/14/2010 \$183,155.39
 Escrow Bal. on 07/14/2010 \$4,312.02
 Interest Paid Year to Date \$5,903.27
 Taxes Paid Year to Date \$0.00
 Insurance Paid Year to Date \$0.00
 Late Charges Paid Year to Date \$0.00

Customer Service Info:

E-mail us: Loaninfo@taylorbean.com

Return Service Requested
 Sean Ireland
 1608 E. Comanche Avenue
 Tampa, FL 33610

Recent Activity:

Date	Description	Principal Amount	Interest Amount	Escrow Amount	Other Funds	Late Charge	Total
07/13/2010	Regular Payment	\$212.47	\$840.44	\$365.64	\$0.00	\$0.00	\$1,418.55

Insurance Information:

Ins Co Name: Florida Peninsula Insurance Co.
 Ins Policy No.: FPH107363000

Thank you for your prompt payment!

Detach Here

Loan #: 3442536

Property Address:
 1608 E. Comanche Avenue
 Tampa, FL 33610

Customer:
 Sean Ireland
 1608 E. Comanche Avenue
 Tampa, FL 33610

Undesignated additional funds will be applied first to advances or fees due and then to principal.

PAYMENT DUE DATE: 08/01/2010
 Regular Monthly Payment: **\$1,418.55**
 Total Amount Due: **\$1,418.55**
 Amount Due if Received After 08/16/2010: **\$1,418.55**

MORTGAGE PAYMENT COUPON

Please allow 7-14 days for delivery via mail.

Extra Principal Paid:

Extra Escrow Paid:

Late Charge Paid:

Enter Total Amount Paid:



Taylor, Bean & Whitaker Mortgage Corp
 315 NE 14th Street
 Ocala, FL 34470

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