UNITED STATES BANKRUPTCY COURT MIDDLE DISTRICT OF FLORIDA JACKSONVILLE DIVISION

Sandy Smith

Creditor/Defendant

VS.

In re:

INC.

Chapter 11

TAYLOR, BEAN & WHITAKER MORTGAGE CORP:

CASE NO. 3:09-BK-7047-JAF

HOME AMERICA MORTGAGE,

CASE NO. 3:09-BK-10023-JAF

REO SPECIALTIES, LLC

CASE NO. 3:09-BK-10022-JAF

Debtors/Plaintiffs

REQUEST FOR AMENDMENT AND MODIFICATION OF CLAIM NUMBER 219

Comes now Sandy Smith, Homeowner and Defendant seeking a request by said court on behalf of Defendant to modify and amend said claim number 219. Due to future evidence to be provided to court on behalf of defendant, claim needs to be changed to reflect three Debtors, Taylor Bean and Whitaker, REO Specialties, LLC and Home American Mortgage and to strike any other listed name(s) on claim.

Sandy Smith request that the amount listed on said claim should be amended and openended to reflect the hearing on evidence provided by and on behalf of Homeowners Sandy Smith, respectfully.

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that a true and correct copy of the foregoing has been served via mail to: Elena Escamilla, Trial Attorney, Office of the United States Trustee. U.S. Department of Justice Florida Bar No: 898414, 135 W. Central Blvd., Suite 620 Orlando FL. 32801 and served to via mail to: Edward J. Peterson, III (FBN 014612) STRICHTER, RIEDEL, BLAIN & PROSSER, P.A. (Attorneys for the Debtor/Plaintiff) 110 East Madison Street, Suite 200 Tampa, FL 33602.

Sandy/Smith

1427 Wild Horse Ln. Stephenville TX 76401

254-977-4731

AFFIDAVIT

STATE OF TEXAS

§ §

COUNTY OF ERATH §

This instrument was acknowledged before me on the 8 day of March Sandy Smith in the capacity stated therein.

, 2011, by



Notary Public, State of Texas

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B 10 (Official Form 10) (12/08)		
UNITED STATES BANKRUPTCY COURT Middle District of Florida, Jacksonville Div.	PROOF OF CLAIM	
Name of Debtor:	Case Number: 3:09-bk-07047-JAF	
Name of Debtor: TAYLOR, BEAN & WHITAKER MORTGAGE CORP. TAYLOR, BEAN & WHITAKER MORTGAGE CORP.	the case. A request for payment of an	
TAYLOR, BEAN & WHITAKER MORIGAGE CORP. 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.		
Name of Creditor (the person or other, entity to whom the debtor owes money or property):	Check this box to indicate that this claim amends a previously filed	
Sandy Sinita	claim.	
Name and address where notices should be sent:	Good China Number	
P.O Box 510 Stephenville Tx 76401	Court Claim Number:(If known)	
2 Labutano 11.0		
254-977-4731	Filed on: Check this box if you are aware that	
Name and address where payment should be sent (if different from above):	anyone else has filed a proof of claim	
	relating to your claim. Attach copy of statement giving particulars.	
Telephone number:	Check this box if you are the debtor or trustee in this case.	
	5. Amount of Claim Entitled to	
1. Amount of Ciaim as of Date Case Pilot.	Priority under 11 U.S.C. §507(a). If any portion of your claim falls in	
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.	one of the following categories, check the box and state the	
If all or part of your claim is entitled to priority, complete item 5.	amount. Specify the priority of the claim.	
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.	Domestic support obligations under	
2. Basis for Claim: Fraud - Breech of Contract	11 U.S.C. §507(a)(1)(A) or (a)(1)(B).	
(See instruction #2 on reverse side.) M SPT 40.48 F 72.00	_ Wages, salaries, or commissions (up	
3. Last four digits of any number by which creditor identifies debtor:	to \$10,950*) earned within 180 days	
3a. Debtor may have scheduled account as:	before filing of the bankruptcy petition or cessation of the debtor's	
(See instruction #3a on reverse side.)	business, whichever is earlier - 11	
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	U.S.C. §507 (a)(4).	
information.	_ Contributions to an employee benefit	
	plan - 11 U.S.C. §507 (a)(5).	
Nature of property or right of setoff: Real Estate Motor Vehicle Other Describe:	_ Up to \$2,425* of deposits toward	
	purchase, lease, or rental of property	
Value of Property: \$ Annual Interest Rate%	or services for personal, family, or household use - 11 U.S.C. §507	
Amount of arrearage and other charges as of time case filed included in secured claim,	(a)(7).	
if any: SBasis for perfection:	Taxes or penalties owed to	
Amount of Secured Claim: \$ Amount Unsecured: \$	governmental units - 11 U.S.C. §507 (a)(8).	
6. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim.	Cother - Specify applicable paragraph of 11 U.S.C. §507 (a)().	
7. Documents: Attach 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 of running accounts, contracts, judgments, mortgages, and security agreements of documents providing evidence of perfection of	Amount entitled to priority:	
You may also attach a summary. Attach reducted copies of declining providing a security interest. You may also attach a summary. (See instruction 7 and definition of "reducted" on reverse side.)	\$	
DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER	*Amounts are subject to adjustment on	
DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAT BE BESTROTED TO SCANNING.	4/1/10 and every 3 years thereafter with	
	respect to cases commenced on or after	
If the documents are not available, please explain:	the date of adjustment. FOR COURT USE ONL	
Date: 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 not	n the notice	
address above. Attach eepy of power of attorney, if any.	l	
Couch with		
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B 10 (Official Form 10) (12/08)			
UNITED STATES BANKRUPTCY COURT Middle District of Florida, Jacksonville Div.	Casa Musek	PROOF OF CLAIM	
Name of Debtor: 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.			
Name of Creditor (the person or other entity to whom the debtor owes money or property): Malcolm Cisneros		nis box to indicate that this mends a previously filed	
Name and address where notices should be sent: Malcolm Cisneros 2112 Business Center Drive Irvine, California 92612 CLAIM FILED JACKSONVILLE, FLORIDA	Court Claim Number:		
Telephone number: FEB 0 1 2010 (949) 252-9400			
Name and address where payment should be sent (if different from above CLERK, U. S. BANKRUPTCY COURT MIDDLE DISTRICT OF FLORIDA	anyone relating	his box if you are aware that else has filed a proof of claim to your claim. Attach copy of nt giving particulars.	
Telephone number:	or truste	this box if you are the debtor	
1. Amount of Claim as of Date Case Filed: \$ 80,553.08	Priorit	nt of Claim Entitled to y under 11 U.S.C. §507(a). If	
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.	any portion of your claim falls in one of the following categories, check the box and state the		
If all or part of your claim is entitled to priority, complete item 5.	amoun		
☐ 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.	☐ Domes	e priority of the claim.	
2. Basis for Claim: Services performed	ŀ	.C. §507(a)(1)(A) or (a)(1)(B).	
(See instruction #2 on reverse side.) 3. Last four digits of any number by which creditor identifies debtor:	to \$10	s, salaries, or commissions (up 1,950°) earned within 180 days of filing of the bankruptcy	
3a. Debtor may have scheduled account as: (See instruction #3a on reverse side.) 4. Secured Claim (See instruction #4 on reverse side.)	petitio busine	on or cessation of the debtor's ess, whichever is earlier – 11	
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.	☐ Contri	butions to an employee benefit 11 U.S.C. §507 (a)(5).	
Nature of property or right of setoff: Real Estate Motor Vehicle Other Describe:	□ Up to	\$2,425* of deposits toward	
Value of Property:S Annual Interest Rate%	or ser	ase, lease, or rental of property vices for personal, family, or hold use - 11 U.S.C. §507	
Amount of arrearage and other charges as of time case filed included in secured claim,	(a)(7)		
if any: \$Basis for perfection:	☐ Taxes	or penalties owed to nmental units 11 U.S.C. §507	
Amount of Secured Claim: \$ Amount Unsecured: \$	(a)(8)		
6. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim.	Other	- Specify applicable paragraph U.S.C. §507 (a)().	
7. Documents: Attach 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. 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.)		mount entitled to priority:	
DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.	4/1/10 a respect	its are subject to adjustment on ind every 3 years thereafter with to cases commenced on or after	
If the documents are not available, please explain:	the date	of adjustment. FOR COURT USE ONLY	
Date: 01/29/2010 Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the other person authorized to file this claim and state address and telephone number if different from address above. Attach copy of power of attorney, if any.	creditor or n the notice	T, B & W Mortgage Co	

DAVID OUNNINGHAM CEG