

In re **Le-Nature's, Inc.**

Case No. **06-25454-MBM**

Debtor

**SCHEDULE D. CREDITORS HOLDING SECURED CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

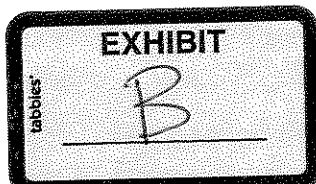
If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community		C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
		H W J C						
Account No. <b>xx1031</b>  <b>Citicapital Commercial Corp.</b> <b>PO Box 6229</b> <b>Carol Stream, IL 60197</b>								
			<b>Various</b>					
			<b>Capital Lease</b>					
			Value \$ <b>0.00</b>				<b>49,414.29</b>	<b>Unknown</b>
Account No. <b>xx1919</b>  <b>CreekrIDGE Capital LLC-LB</b> <b>PO BOX 1150-10</b> <b>Minneapolis, MN 55480-1150</b>			<b>Various</b>					
			<b>Capital Lease</b>					
			Value \$ <b>0.00</b>				<b>103,563.00</b>	<b>Unknown</b>
Account No. <b>xx1171</b>  <b>CreekrIDGE Captial LLC-WELB</b> <b>NW-8704</b> <b>PO BOX 1450</b> <b>Minneapolis, MN 55485-8704</b>			<b>Various</b>					
			<b>Capital Lease</b>					
			Value \$ <b>0.00</b>				<b>89,189.00</b>	<b>Unknown</b>
Account No. <b>xx0502</b>  <b>Merrill Lynch Capital</b> <b>4660 Paysphere Circle</b> <b>Chicago, IL 60674</b>			<b>Various</b>					
			<b>Capital Lease</b>					
			Value \$ <b>0.00</b>				<b>498,496.30</b>	<b>Unknown</b>
Subtotal							<b>740,662.59</b>	<b>0.00</b>
(Total of this page)								

1 continuation sheets attached



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**SCHEDULE D. CREDITORS HOLDING SECURED CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. <b>xx2069</b>			<b>Various</b>					
<b>ORIX Financial Services, Inc. Structured Finance Group PO BOX 7247-0369 Philadelphia, PA 19170-0369</b>	-		<b>Capital Lease</b>					
			Value \$ <b>0.00</b>				<b>294,433.55</b>	<b>Unknown</b>
Account No. <b>xx1315</b>			<b>Various</b>					
<b>The CIT Group/EF 1540 West Fountainhead Parkway Tempe, AZ 85282</b>	-		<b>Capital Lease</b>					
			Value \$ <b>0.00</b>				<b>1,992,500.82</b>	<b>Unknown</b>
Account No.			<b>9/1/2006</b>					
<b>Wachovia Bank, National Association as Administrative Agent Charlotte Plaza, CP.8 201 South College Street Charlotte, NC 28288-0680</b>	-		<b>Amended and Restated Credit Agreement</b>			<b>X</b>		
			<b>Senior Secured Debt</b>					
			Value \$ <b>Unknown</b>				<b>265,000,000.00</b>	<b>Unknown</b>
Account No.			<b>9/1/2006</b>					
<b>Wachovia Bank, National Association as Administrative Agent Charlotte Plaza, CP.8 201 South College Street Charlotte, NC 28288-0680</b>	-		<b>Revolving credit loan in an aggregate principal amount of up to \$20 million</b>			<b>X</b>		
			Value \$ <b>Unknown</b>				<b>13,000,000.00</b>	<b>Unknown</b>
Account No.								
			Value \$					
Subtotal (Total of this page)							<b>280,286,934.37</b>	<b>0.00</b>
Total (Report on Summary of Schedules)							<b>281,027,596.96</b>	<b>0.00</b>

Sheet **1** of **1** continuation sheets attached to  
Schedule of Creditors Holding Secured Claims