

B1 (Official Form 1)(4/10)

<b>United States Bankruptcy Court</b> <b>Eastern District of Virginia</b>		<b>Voluntary Petition</b>	
Name of Debtor (if individual, enter Last, First, Middle): <b>Opensided MRI of San Antonio, LLC</b>		Name of Joint Debtor (Spouse) (Last, First, Middle):	
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): <b>DBA Opensided MRI; DBA Opensided MRI of San Antonio</b>		All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):	
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all) <b>54-1817395</b>		Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all)	
Street Address of Debtor (No. and Street, City, and State): <b>5282 Medical Drive, Suite 100</b> <b>San Antonio, TX</b> <div style="text-align: right; font-size: small;">ZIP Code <b>78229</b></div>		Street Address of Joint Debtor (No. and Street, City, and State): <div style="text-align: right; font-size: small;">ZIP Code</div>	
County of Residence or of the Principal Place of Business: <b>Bexar</b>		County of Residence or of the Principal Place of Business:	
Mailing Address of Debtor (if different from street address): <b>301 Concourse Blvd., #230</b> <b>Glen Allen, VA</b> <div style="text-align: right; font-size: small;">ZIP Code <b>23059</b></div>		Mailing Address of Joint Debtor (if different from street address): <div style="text-align: right; font-size: small;">ZIP Code</div>	
Location of Principal Assets of Business Debtor (if different from street address above):			
<b>Type of Debtor</b> (Form of Organization) (Check one box)  <input type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input checked="" type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)		<b>Nature of Business</b> (Check one box)  <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input checked="" type="checkbox"/> Other  <b>Tax-Exempt Entity</b> (Check box, if applicable) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).	
<b>Chapter of Bankruptcy Code Under Which the Petition is Filed</b> (Check one box)  <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input checked="" type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13  <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding		<b>Nature of Debts</b> (Check one box)  <input type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input checked="" type="checkbox"/> Debts are primarily business debts.	
<b>Filing Fee</b> (Check one box)  <input checked="" type="checkbox"/> Full Filing Fee attached  <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A.  <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.		<b>Chapter 11 Debtors</b> Check one box: <input checked="" type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,343,300 ( <i>amount subject to adjustment on 4/01/13 and every three years thereafter</i> ). Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).	
<b>Statistical/Administrative Information</b> *** <b>Robert S. Westermann 43294</b> *** <input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.		THIS SPACE IS FOR COURT USE ONLY	
<b>Estimated Number of Creditors</b> <div style="display: flex; justify-content: space-between; font-size: small;"> <span><input checked="" type="checkbox"/> 1-49</span> <span><input type="checkbox"/> 50-99</span> <span><input type="checkbox"/> 100-199</span> <span><input type="checkbox"/> 200-999</span> <span><input type="checkbox"/> 1,000-5,000</span> <span><input type="checkbox"/> 5,001-10,000</span> <span><input type="checkbox"/> 10,001-25,000</span> <span><input type="checkbox"/> 25,001-50,000</span> <span><input type="checkbox"/> 50,001-100,000</span> <span><input type="checkbox"/> OVER 100,000</span> </div>			
<b>Estimated Assets</b> <div style="display: flex; justify-content: space-between; font-size: small;"> <span><input type="checkbox"/> \$0 to \$50,000</span> <span><input type="checkbox"/> \$50,001 to \$100,000</span> <span><input checked="" type="checkbox"/> \$100,001 to \$500,000</span> <span><input type="checkbox"/> \$500,001 to \$1 million</span> <span><input type="checkbox"/> \$1,000,001 to \$10 million</span> <span><input type="checkbox"/> \$10,000,001 to \$50 million</span> <span><input type="checkbox"/> \$50,000,001 to \$100 million</span> <span><input type="checkbox"/> \$100,000,001 to \$500 million</span> <span><input type="checkbox"/> \$500,000,001 to \$1 billion</span> <span><input type="checkbox"/> More than \$1 billion</span> </div>			
<b>Estimated Liabilities</b> <div style="display: flex; justify-content: space-between; font-size: small;"> <span><input type="checkbox"/> \$0 to \$50,000</span> <span><input type="checkbox"/> \$50,001 to \$100,000</span> <span><input type="checkbox"/> \$100,001 to \$500,000</span> <span><input checked="" type="checkbox"/> \$500,001 to \$1 million</span> <span><input type="checkbox"/> \$1,000,001 to \$10 million</span> <span><input type="checkbox"/> \$10,000,001 to \$50 million</span> <span><input type="checkbox"/> \$50,000,001 to \$100 million</span> <span><input type="checkbox"/> \$100,000,001 to \$500 million</span> <span><input type="checkbox"/> \$500,000,001 to \$1 billion</span> <span><input type="checkbox"/> More than \$1 billion</span> </div>			

**Voluntary Petition**

(This page must be completed and filed in every case)

Name of Debtor(s):

**Opensided MRI of San Antonio, LLC****All Prior Bankruptcy Cases Filed Within Last 8 Years** (If more than two, attach additional sheet)

Location

Where Filed: **- None -**

Case Number:

Date Filed:

Location

Where Filed:

Case Number:

Date Filed:

**Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor** (If more than one, attach additional sheet)

Name of Debtor:

**- None -**

Case Number:

Date Filed:

District:

Relationship:

Judge:

**Exhibit A**

(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)

☐ Exhibit A is attached and made a part of this petition.

**Exhibit B**

(To be completed if debtor is an individual whose debts are primarily consumer debts.)

I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b).

**X**

Signature of Attorney for Debtor(s)

(Date)

**Exhibit C**

Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?

☐ Yes, and Exhibit C is attached and made a part of this petition.

☒ No.

**Exhibit D**

(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)

☐ Exhibit D completed and signed by the debtor is attached and made a part of this petition.

If this is a joint petition:

☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.

**Information Regarding the Debtor - Venue**

(Check any applicable box)

- ☒ Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.
- ☒ There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.
- ☐ Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.

**Certification by a Debtor Who Resides as a Tenant of Residential Property**

(Check all applicable boxes)

- ☐ Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)

\_\_\_\_\_  
(Name of landlord that obtained judgment)

\_\_\_\_\_  
(Address of landlord)

- ☐ Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and
- ☐ Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.
- ☐ Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

**Voluntary Petition***(This page must be completed and filed in every case)*

Name of Debtor(s):

**Opensided MRI of San Antonio, LLC****Signatures****Signature(s) of Debtor(s) (Individual/Joint)**

I declare under penalty of perjury that the information provided in this petition is true and correct.  
 [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.  
 [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

**X** \_\_\_\_\_  
 Signature of Debtor

**X** \_\_\_\_\_  
 Signature of Joint Debtor

\_\_\_\_\_  
 Telephone Number (If not represented by attorney)

\_\_\_\_\_  
 Date

**Signature of a Foreign Representative**

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.

☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

**X** \_\_\_\_\_  
 Signature of Foreign Representative

\_\_\_\_\_  
 Printed Name of Foreign Representative

\_\_\_\_\_  
 Date

**Signature of Non-Attorney Bankruptcy Petition Preparer**

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

\_\_\_\_\_  
 Printed Name and title, if any, of Bankruptcy Petition Preparer

\_\_\_\_\_  
 Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

\_\_\_\_\_  
 Address

**X** \_\_\_\_\_  
 Date

\_\_\_\_\_  
 Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

\_\_\_\_\_  
 Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

\_\_\_\_\_  
 If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

\_\_\_\_\_  
*A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.*

**Signature of Attorney\***

**X** **/s/ Robert S. Westermann** \_\_\_\_\_  
 Signature of Attorney for Debtor(s)

**Robert S. Westermann 43294**

\_\_\_\_\_  
 Printed Name of Attorney for Debtor(s)

**Hirschler Fleischer A Professional Corporation**

\_\_\_\_\_  
 Firm Name

**The Edgeworth Building**

**P.O. Box 500**

**Richmond, VA 23218-0500**

\_\_\_\_\_  
 Address

**Email: abowers@hf-law.com**

**804-771-9500 Fax: 804-644-0957**

\_\_\_\_\_  
 Telephone Number

**April 14, 2010**

\_\_\_\_\_  
 Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

**Signature of Debtor (Corporation/Partnership)**

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

**X** **/s/ Neil R. Burgess** \_\_\_\_\_  
 Signature of Authorized Individual

**Neil R. Burgess**

\_\_\_\_\_  
 Printed Name of Authorized Individual

**Chairman, President, and CEO**

\_\_\_\_\_  
 Title of Authorized Individual

**April 14, 2010**

\_\_\_\_\_  
 Date

## **OPENSIDED MRI OF SAN ANTONIO, LLC**

### **Consent Of Manager and Majority Member**

The undersigned Manager ("Manager") of OpenSided MRI of San Antonio, LLC, a Virginia limited liability company ("Company"), pursuant to its authority provided for in the Company's Operating Agreement, hereby approves and adopts the following actions by written consent, all of which actions shall be deemed to have been approved and adopted by the undersigned both as Manager and as the holder of at least a majority of the membership interests of the Company:

**WHEREAS**, the Manager has determined based on the information presented to it that the Company is eligible to file a voluntary petition under Chapter 11 of the United States Bankruptcy Code (a "Petition"); and

**WHEREAS**, in the judgment of the Manager, it is desirable and in the best interests of the Company that the Company file a Petition;

**NOW, THEREFORE, BE IT RESOLVED** that Neil Burgess, the Chief Executive Officer of the Manager (the "Authorized Officer") is authorized and directed, after consultation with counsel, to prepare, execute, verify, and cause to be filed an appropriate petition under Chapter 11 of the United States Bankruptcy Code in the Richmond Division of the United States Bankruptcy Court for the Eastern District of Virginia, and that the Authorized Officer is designated as the Company's official representative for appearances in the Chapter 11 proceeding, and authorized to execute and cause to be filed such documents as are necessary to effectuate such designation; and it is

**RESOLVED** that the Authorized Officer is authorized to retain and employ the law firm of Hirschler Fleischer, P.C. of Richmond, Virginia, at its customary hourly rates and charges as they now exist and as they may hereafter change, to advise and represent the Company on all matters relating to or arising in the Chapter 11 proceeding, including, without limitation, the preparation and filing of the voluntary petition and all lists, schedules, pleadings, and other necessary documents; and it is

**RESOLVED** that the Authorized Officer is authorized to prepare, with the assistance of others where necessary, execute, and cause to be filed all schedules, lists, pleadings, and other papers, and to take any and all actions, which may be necessary or desirable in connection with the Chapter 11 proceeding; and it is

**RESOLVED** that in connection with the filing of the Petition, the Authorized Officer is authorized to negotiate and enter into a new or amended credit facility with Bank of America ("Bank") under which Bank will serve as a debtor in possession lender to the Company's affiliate, MMR Holdings Inc., to provide liquidity for the Company's continued operations (the "Credit Facility"), and to enter into such security and other arrangements and take any and all actions and execute and deliver on behalf of the Company any and all agreements which the Authorized Officer may deem appropriate in connection therewith; and it is

**RESOLVED**, that all prior actions taken by any officer or other authorized agent of the Company relating to the foregoing resolutions are ratified and approved.

No further action is taken or consented to.  
EFFECTIVE DATE: April 12, 2010

**MMR HOLDINGS INC., Manager**

By: 

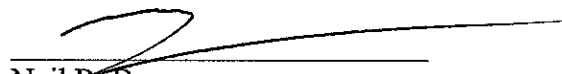
Neil Burgess, Chief Executive Officer

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**DECLARATION REGARDING THE LIST OF CREDITORS HOLDING  
THE TWENTY LARGEST UNSECURED CLAIMS AGAINST THE DEBTOR**

I, Neil R. Burgess, of the debtor, MMR Holdings, Inc., and its related debtor affiliates in these Chapter 11 cases, declare under the penalty of perjury that I have read the foregoing list and that it is true and correct to the best of my knowledge, information, and belief.

Dated: 4/12/10

  
\_\_\_\_\_  
Neil R. Burgess  
Chairman, President, and  
Chief Executive Officer

**United States Bankruptcy Court**  
**Eastern District of Virginia**

In re **Opensided MRI of San Antonio, LLC**

Debtor(s)

Case No.

Chapter **11**

**LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS**

Following is the list of the debtor's creditors holding the 20 largest unsecured claims. The list is prepared in accordance with Fed. R. Bankr. P. 1007(d) for filing in this chapter 11 [or chapter 9] case. The list does not include (1) persons who come within the definition of "insider" set forth in 11 U.S.C. § 101, or (2) secured creditors unless the value of the collateral is such that the unsecured deficiency places the creditor among the holders of the 20 largest unsecured claims. If a minor child is one of the creditors holding the 20 largest unsecured claims, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

(1) <i>Name of creditor and complete mailing address including zip code</i>	(2) <i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	(3) <i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	(4) <i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff</i>	(5) <i>Amount of claim [if secured, also state value of security]</i>
ADP, Inc. P.O. Box 9001006 Louisville, KY 40290-1006	ADP, Inc. P.O. Box 9001006 Louisville, KY 40290-1006	Payroll Services		161.40
Advanced MRI Imaging of San Antonio 5 Sancturary Drive San Antonio, TX 78248	Advanced MRI Imaging of San Antonio 5 Sancturary Drive San Antonio, TX 78248	Radiology Fee		23,460.00
AT&T P.O. Box 105262 Atlanta, GA 30348	AT&T P.O. Box 105262 Atlanta, GA 30348	Local Phone Service		922.30
Blue Cross/Blue Sheild of Texas P.O. Box 650776 Dallas, TX 75265	Blue Cross/Blue Sheild of Texas P.O. Box 650776 Dallas, TX 75265	Patient Refund		338.52
Cambridge - La Salle 5282 Medical Drive, #525 San Antonio, TX 78229	Cambridge - La Salle 5282 Medical Drive, #525 San Antonio, TX 78229	Office Rent		5,792.12
Cambridge - La Salle 5282 Medical Drive, #525 San Antonio, TX 78229	Cambridge - La Salle 5282 Medical Drive, #525 San Antonio, TX 78229	Accrued CAM charges for 2009		1,568.00
Couriers of San Antonio P.O. Box 1389 Houston, TX 77251	Couriers of San Antonio P.O. Box 1389 Houston, TX 77251	Courier Services		271.45
David Dennis, M.D. 5282 Medical Drive, Suite 200 San Antonio, TX 78229	David Dennis, M.D. 5282 Medical Drive, Suite 200 San Antonio, TX 78229	Medical Services		10,850.00
Denton Management Associates P.O. Box 291191 San Antonio, TX 78229	Denton Management Associates P.O. Box 291191 San Antonio, TX 78229	Billing Services		164.50
Empire P.O. Box 30287 New York, NY 10087	Empire P.O. Box 30287 New York, NY 10087	Patient Refund		127.07
Hitachi Capital 800 Norwalk Norwalk, CT 06854	Hitachi Capital 800 Norwalk Norwalk, CT 06854	Equipment Loan		49,383.01

B4 (Official Form 4) (12/07) - Cont.

In re **Opensided MRI of San Antonio, LLC**

Case No. \_\_\_\_\_

Debtor(s)

**LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS**

(Continuation Sheet)

(1) <i>Name of creditor and complete mailing address including zip code</i>	(2) <i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	(3) <i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	(4) <i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff</i>	(5) <i>Amount of claim [if secured, also state value of security]</i>
Hitachi Capital America 800 Norwalk Norwalk, CT 06854	Hitachi Capital America 800 Norwalk Norwalk, CT 06854	Equipment Financing		49,383.01 (0.00 secured)
Hitachi Medical Systems 1959 Summit Commerce Park Twinsburg, OH 44087	Hitachi Medical Systems 1959 Summit Commerce Park Twinsburg, OH 44087	Maintenance for MRI		6,847.92
Humana Health Care Plans P.O. Box 931655 Atlanta, GA 31193	Humana Health Care Plans P.O. Box 931655 Atlanta, GA 31193	Patient Refunds		705.30
Knight & Associates 528 Maddox Drive Ellijay, GA 30540-5571	Knight & Associates 528 Maddox Drive Ellijay, GA 30540-5571	Billing Services		4,793.53
Med Star Funding 730 1RR620 North Suite 155-334 Austin, TX 78726	Med Star Funding 730 1RR620 North Suite 155-334 Austin, TX 78726	Patient Refunds		11,645.00
MXR 11815 Starcrest Dr. San Antonio, TX 78247	MXR 11815 Starcrest Dr. San Antonio, TX 78247	Medical Supplies		703.93
Smart Medical Systems, Inc. 4275 Kellway Circle, Suite 106 Addison, TX 75001	Smart Medical Systems, Inc. 4275 Kellway Circle, Suite 106 Addison, TX 75001	Medical Equipment		514.19
Texas Comptroller of Public Account Post Office Box 13528, Capital Stn. Austin, TX 78711-3528	Texas Comptroller of Public Account Post Office Box 13528, Capital Stn. Austin, TX 78711-3528	2009 Personal Property Tax		1,359.00
Texas Comptroller of Public Account Post Office Box 13528, Capital Stn. Austin, TX 78711-3528	Texas Comptroller of Public Account Post Office Box 13528, Capital Stn. Austin, TX 78711-3528	2009 Franchise Tax		6,409.00

**DECLARATION UNDER PENALTY OF PERJURY  
ON BEHALF OF A CORPORATION OR PARTNERSHIP**

I, the Chairman, President, and CEO of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing list and that it is true and correct to the best of my information and belief.

Date April 14, 2010Signature /s/ Neil R. Burgess

**Neil R. Burgess**  
Chairman, President, and CEO

*Penalty for making a false statement or concealing property:* Fine of up to \$500,000 or imprisonment for up to 5 years or both.  
18 U.S.C. §§ 152 and 3571.



ADP, Inc.  
P.O. Box 9001006  
Louisville, KY 40290-1006

Advanced MRI Imaging of San Antonio  
5 Sancturary Drive  
San Antonio, TX 78248

AT&T  
P.O. Box 105262  
Atlanta, GA 30348

Bank of America  
201 N. Tryon Street  
Charlotte, NC 28202

Blue Cross/Blue Sheild of Texas  
P.O. Box 650776  
Dallas, TX 75265

Cambridge - La Salle  
5282 Medical Drive, #525  
San Antonio, TX 78229

Cambridge Westgate Medical Ctr, LP  
c/o Cambridge Health Mgmt., Inc.  
1717 Main Street, 59th Floor  
Dallas, TX 75201

Couriers of San Antonio  
P.O. Box 1389  
Houston, TX 77251

Data Technologies  
3941 Deep Rock Road  
Henrico, VA 23233

David Dennis, M.D.  
5282 Medical Drive, Suite 200  
San Antonio, TX 78229

Denton Management Associates  
P.O. Box 291191  
San Antonio, TX 78229

Empire  
P.O. Box 30287  
New York, NY 10087

GE Capital Corporation  
1961 Hirst Drive  
Moberly, MO 65270

Hitachi Capital  
800 Norwalk  
Norwalk, CT 06854

Hitachi Capital America  
800 Norwalk  
Norwalk, CT 06854

Hitachi Medical Systems  
1959 Summit Commerce Park  
Twinsburg, OH 44087

Hitachi Medical Systems  
1959 Summit Commerce Park  
Twinsburg, OH 44087-2371

Humana Health Care Plans  
P.O. Box 931655  
Atlanta, GA 31193

Knight & Associates  
528 Maddox Drive  
Ellijay, GA 30540-5571

Med Star Funding  
730 1RR620 North Suite 155-334  
Austin, TX 78726

MXR  
11815 Starcrest Dr.  
San Antonio, TX 78247

Punchdown  
8023 Darkwood  
San Antonio, TX 78250

Smart Medical Systems, Inc.  
4275 Kellway Circle, Suite 106  
Addison, TX 75001

Texas Comptroller of Public Account  
Post Office Box 13528, Capital Stn.  
Austin, TX 78711-3528

Texas Wired Music  
P.O. box 1098  
San Antonio, TX 78294