

GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

****CLAIM NUMBER VOIDED BY AGENT****

Claim Number: 93
 Claim Date: / /
 Debtor: DEBTOR NOT FOUND
 Comments: EXPUNGED

TOTAL Claimed: \$0.00

****CLAIM NUMBER VOIDED BY AGENT****

Claim Number: 19999
 Claim Date: / /
 Debtor: DEBTOR NOT FOUND
 Comments: EXPUNGED

TOTAL Claimed: \$0.00

40 SOUTH PALAFOX PLACE LLC
 C/O SCOTT A STICHTER, ESQ
 110 E MADISON ST, STE 200
 TAMPA, FL 33602

Claim Number: 323
 Claim Date: 12/22/2021
 Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED Claimed: \$180,000.00 Scheduled: \$32,980.47

A PLACE FOR MOM INC
 701 5TH AVE, STE 3200
 SEATTLE, WA 98104

Claim Number: 20284
 Claim Date: 12/15/2021
 Debtor: SF LAKE PLACID, LLC

UNSECURED Claimed: \$3,864.00

A&E REPAIR
 7832 CLARK MOODY BLVD
 PORT RICHEY, FL 34668

Claim Number: 180
 Claim Date: 12/09/2021
 Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED Claimed: \$2,112.27

GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

ADVANCE GERIATRICS & PRIMARY CARE LLC
ATTN MEGUMI MAGUCHI
9013 UNIVERSITY PKWY, STE G
PENSACOLA, FL 32514

Claim Number: 20159
Claim Date: 12/10/2021
Debtor: NF NINE MILE, LLC

PRIORITY Claimed: \$13,650.00 UNLIQ
UNSECURED Claimed: \$11,350.00 UNLIQ

ADVANCED FIRE PROTECTION SERVICES INC
37 TUPELO AVENUE SE
FORT WALTON BEACH, FL 32548-5434

Claim Number: 20295
Claim Date: 12/16/2021
Debtor: FL HUD BAYSIDE, LLC
Comments: POSSIBLY AMENDED BY 20296

UNSECURED Claimed: \$2,351.13

ADVANCED FIRE PROTECTION SERVICES INC
37 TUPELO AVENUE SW
FORT WALTON BEACH, FL 32548-5434

Claim Number: 20296
Claim Date: 12/16/2021
Debtor: FL HUD BAYSIDE, LLC
Comments: POSSIBLY AMENDED BY 20307
AMENDS CLAIM #20295

UNSECURED Claimed: \$2,351.13

ADVANCED FIRE PROTECTION SERVICES INC
37 TUPELO AVE SE
FORT WALTON BEACH, FL 32548-5434

Claim Number: 20297
Claim Date: 12/16/2021
Debtor: FL HUD DESTIN, LLC
Comments: POSSIBLY AMENDED BY 20298

UNSECURED Claimed: \$1,539.28

ADVANCED FIRE PROTECTION SERVICES INC
37 TUPELO AVE SW
FORT WALTON BEACH, FL 32548-5434

Claim Number: 20298
Claim Date: 12/16/2021
Debtor: FL HUD DESTIN, LLC
Comments: POSSIBLY AMENDED BY 20309
AMENDS CLAIM #20297

UNSECURED Claimed: \$1,539.28

ADVANCED FIRE PROTECTION SERVICES INC 37 TUPELO AVE SW FORT WALTON BEACH, FL 32548	Claim Number: 20299 Claim Date: 12/16/2021 Debtor: NF PENSACOLA MANOR, LLC Comments: POSSIBLY AMENDED BY 20308
UNSECURED	Claimed: \$489.82
ADVANCED FIRE PROTECTION SERVICES INC 37 TUPELO AVE SW FORT WALTON BEACH, FL 32548-5434	Claim Number: 20307 Claim Date: 12/20/2021 Debtor: FL HUD BAYSIDE, LLC Comments: POSSIBLY AMENDED BY 20313 AMENDS CLAIM #20296
UNSECURED	Claimed: \$2,351.13
ADVANCED FIRE PROTECTION SERVICES INC 37 TUPELO AVE SW FORT WALTON BEACH, FL 32548	Claim Number: 20308 Claim Date: 12/20/2021 Debtor: NF PENSACOLA MANOR, LLC Comments: POSSIBLY AMENDED BY 20310 AMENDS CLAIM #20299
UNSECURED	Claimed: \$489.82
ADVANCED FIRE PROTECTION SERVICES INC 37 TUPELO AVE SW FORT WALTON BEACH, FL 32548-5434	Claim Number: 20309 Claim Date: 12/20/2021 Debtor: FL HUD DESTIN, LLC Comments: AMENDS CLAIM #20298
UNSECURED	Claimed: \$1,539.28
ADVANCED FIRE PROTECTION SERVICES INC 37 TUPELO AVE SW FORT WALTON BEACH, FL 32548	Claim Number: 20310 Claim Date: 12/20/2021 Debtor: NF PENSACOLA MANOR, LLC Comments: AMENDS CLAIM #20308
UNSECURED	Claimed: \$489.82

GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

ADVANCED FIRE PROTECTION SERVICES INC
37 TUPELO AVE SW
FORT WALTON BEACH, FL 32548

Claim Number: 20311
Claim Date: 12/20/2021
Debtor: NF PENSACOLA MANOR, LLC
Comments:
AMENDS CLAIM #20308

UNSECURED Claimed: \$489.82

ADVANCED FIRE PROTECTION SERVICES INC
37 TUPELO AVENUE SW
FORT WALTON BEACH, FL 32548-5434

Claim Number: 20313
Claim Date: 12/20/2021
Debtor: FL HUD BAYSIDE, LLC
Comments:
AMENDS CLAIM #20307

UNSECURED Claimed: \$2,351.13

AETNA INC
C/O MCGUIREWOODS LLP
ATTN AARON MCCOLLOUGH
77 W WACKER DR, STE 4100
CHICAGO, IL 60601

Claim Number: 20397
Claim Date: 12/31/2021
Debtor: FL HUD BAYBREEZE, LLC

UNSECURED Claimed: \$70.00

AETNA INC
C/O MCGUIREWOODS LLP
ATTN AARON MCCOLLOUGH
77 W WACKER DR, STE 4100
CHICAGO, IL 60601

Claim Number: 20398
Claim Date: 12/31/2021
Debtor: SF SALERNO, LLC

UNSECURED Claimed: \$1,667.82

AETNA INC
C/O MCGUIREWOODS LLP
ATTN AARON MCCOLLOUGH
77 W WACKER DR, STE 4100
CHICAGO, IL 60601

Claim Number: 20399
Claim Date: 12/31/2021
Debtor: SF LAKE PLACID, LLC

UNSECURED Claimed: \$5,787.22

GULF COAST HEALTH CARE, LLC
Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

AETNA INC C/O MCGUIREWOODS LLP ATTN AARON MCCOLLOUGH 77 W WACKER DR, STE 4100 CHICAGO, IL 60601	Claim Number: 20400 Claim Date: 12/31/2021 Debtor: NF SUWANNEE, LLC
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UNSECURED	Claimed:	\$32.71
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AETNA INC C/O MCGUIREWOODS LLP ATTN AARON MCCOLLOUGH 77 W WACKER DR, STE 4100 CHICAGO, IL 60601	Claim Number: 20401 Claim Date: 12/31/2021 Debtor: NF NINE MILE, LLC
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UNSECURED	Claimed:	\$2,936.84
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AETNA INC C/O MCGUIREWOODS LLP ATTN AARON MCCOLLOUGH 77 W WACKER DR, STE 4100 CHICAGO, IL 60601	Claim Number: 20402 Claim Date: 12/31/2021 Debtor: MF FLAGLER, LLC
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UNSECURED	Claimed:	\$805.00
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AETNA INC C/O MCGUIREWOODS LLP ATTN AARON MCCOLLOUGH 77 W WACKER DR, STE 4100 CHICAGO, IL 60601	Claim Number: 20403 Claim Date: 12/31/2021 Debtor: MF HALIFAX, LLC
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UNSECURED	Claimed:	\$2,512.26
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AETNA INC C/O MCGUIREWOODS LLP ATTN AARON MCCOLLOUGH 77 W WACKER DR, STE 4100 CHICAGO, IL 60601	Claim Number: 20404 Claim Date: 12/31/2021 Debtor: FL HUD MARGATE, LLC
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UNSECURED	Claimed:	\$5,598.00
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

AETNA INC C/O MCGUIREWOODS LLP ATTN AARON MCCOLLOUGH 77 W WACKER DR, STE 4100 CHICAGO, IL 60601	Claim Number: 20405 Claim Date: 12/31/2021 Debtor: SF TAMPA, LLC
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UNSECURED	Claimed:	\$5,191.23	
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AETNA INC C/O MCGUIREWOODS LLP ATTN AARON MCCOLLOUGH 77 W WACKER DR, STE 4100 CHICAGO, IL 60601	Claim Number: 20406 Claim Date: 12/31/2021 Debtor: SF BOYNTON, LLC
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UNSECURED	Claimed:	\$1,153.56	
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AIRGAS USA 2015 VAUGHN RD, BLDG 400 KENNESAW, GA 30144	Claim Number: 20376 Claim Date: 12/28/2021 Debtor: MS HUD OCEAN SPRINGS, LLC
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UNSECURED	Claimed:	\$1,464.75	Scheduled:	\$581.22
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AMERICAN TECHCORP PO BOX 39036 LAKEWOOD, WA 98496	Claim Number: 20055 Claim Date: 11/22/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$7,717.00	
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AMERICAN TECHCORP PO BOX 39036 LAKEWOOD, WA 98499	Claim Number: 20101 Claim Date: 12/07/2021 Debtor: GULF COAST HEALTH CARE, LLC Comments: POSSIBLY AMENDED BY 20112
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UNSECURED	Claimed:	\$836.00	
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AMERICAN TECHCORP PO BOX 39036 LAKEWOOD, WA 98499		Claim Number: 20105 Claim Date: 12/08/2021 Debtor: FL HUD BAYSIDE, LLC	
UNSECURED	Claimed:	\$1,617.00	Scheduled: \$1,617.00
AMERICAN TECHCORP PO BOX 39036 LAKEWOOD, WA 98499		Claim Number: 20106 Claim Date: 12/08/2021 Debtor: FL HUD DESTIN, LLC	
UNSECURED	Claimed:	\$1,201.00	
AMERICAN TECHCORP PO BOX 39036 LAKEWOOD, WA 98499		Claim Number: 20107 Claim Date: 12/08/2021 Debtor: MF LAKE EUSTIS, LLC	
UNSECURED	Claimed:	\$723.00	Scheduled: \$723.00
AMERICAN TECHCORP PO BOX 39036 LAKEWOOD, WA 98496		Claim Number: 20108 Claim Date: 12/08/2021 Debtor: MS HUD PINE VIEW, LLC	
UNSECURED	Claimed:	\$350.00	Scheduled: \$350.00
AMERICAN TECHCORP PO BOX 39036 LAKEWOOD, WA 98499		Claim Number: 20109 Claim Date: 12/08/2021 Debtor: FL HUD ROSEWOOD, LLC	
UNSECURED	Claimed:	\$1,387.00	

GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

AMERICAN TECHCORP
PO BOX 39036
LAKEWOOD, WA 98499

Claim Number: 20110
Claim Date: 12/08/2021
Debtor: MS SHELBY, LLC

UNSECURED	Claimed:	\$1,160.00	Scheduled:	\$1,160.00
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AMERICAN TECHCORP
PO BOX 39036
LAKEWOOD, WA 98499

Claim Number: 20111
Claim Date: 12/08/2021
Debtor: MS SINGING, LLC

UNSECURED	Claimed:	\$443.00	Scheduled:	\$443.00
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AMERICAN TECHCORP
PO BOX 39036
LAKEWOOD, WA 98499

Claim Number: 20112
Claim Date: 12/08/2021
Debtor: FL HUD BAYBREEZE, LLC
Comments:
AMENDS CLAIM #20101

UNSECURED	Claimed:	\$836.00	Scheduled:	\$836.00
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ANDERSON, SARAH
4702 POINSETTIA AVE
TALLAHASSEE, FL 32305

Claim Number: 20089
Claim Date: 12/06/2021
Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED	Claimed:	\$0.00 UNDET
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ANTHONY, BETTY
C/O MARY ANTHONY
111 W KINGSFIELD RD
CANTONMENT, FL 32533

Claim Number: 116
Claim Date: 11/22/2021
Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED	Claimed:	\$1,089.41
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GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

ARVELO, ESPERANZA C/O MYRNA ULRICH, PR 919 N MARKET ST, STE 1410 WILMINGTON, DE 19801	Claim Number: 20047 Claim Date: 11/18/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$750,000.00
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ATLANTIC SURGERY CENTER INC 541 HEALTH BLVD DAYTONA BEACH, FL 32114	Claim Number: 367 Claim Date: 12/23/2021 Debtor: MF HALIFAX, LLC
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UNSECURED	Claimed:	\$202.88	Scheduled:	\$767.92
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ATLANTIC SURGERY CENTER INC 541 HEALTH BLVD DAYTONA BEACH, FL 32114	Claim Number: 368 Claim Date: 12/23/2021 Debtor: MF FLAGLER, LLC
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UNSECURED	Claimed:	\$202.88	Scheduled:	\$202.88
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ATLANTIC SURGERY CENTER INC 541 HEALTH BLVD DAYTONA BEACH, FL 32114	Claim Number: 369 Claim Date: 12/23/2021 Debtor: MF OAKWOOD, LLC
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UNSECURED	Claimed:	\$958.77	Scheduled:	\$958.77
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ATMOS ENERGY CORPORATION ATTN BANKRUPTCY GROUP PO BOX 650205 DALLAS, TX 75265-0205	Claim Number: 20274 Claim Date: 12/14/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$1,826.98
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

AUFFANT RECRUITMENT GROUP INC, THE PMB-261 5900 ISLA VERDE AVE, L-2 CAROLINA, PR 00979	Claim Number: 20386 Claim Date: 12/30/2021 Debtor: GULF COAST HEALTH CARE, LLC
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ADMINISTRATIVE	Claimed: \$4,000.00
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AUFFANT RECRUITMENT GROUP INC, THE PMB-261 5900 ISLA VERDE AVE, L-2 CAROLINA, PR 00979	Claim Number: 20387 Claim Date: 12/30/2021 Debtor: GULF COAST HEALTH CARE, LLC
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ADMINISTRATIVE	Claimed: \$8,000.00
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B CLEAN LLC PO BOX 1054 LAUREL, MS 39441	Claim Number: 20026 Claim Date: 11/16/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed: \$580.00
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B CLEAN LLC PO BOX 1054 LAUREL, MS 39441	Claim Number: 20070 Claim Date: 11/30/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed: \$1,130.00
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B&C TECHNOLOGIES 17740 ASHLEY DR, STE 109 PANAMA CITY, FL 32413	Claim Number: 20125 Claim Date: 12/10/2021 Debtor: NF CHIPOLA, LLC
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UNSECURED	Claimed: \$802.52	Scheduled:	\$587.44
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GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

B&C TECHNOLOGIES 17740 ASHLEY DR, STE 109 PANAMA CITY, FL 32413	Claim Number: 20126 Claim Date: 12/10/2021 Debtor: FL HUD BAYSIDE, LLC
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UNSECURED	Claimed:	\$3,914.86	Scheduled:	\$2,997.32
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B&C TECHNOLOGIES 17740 ASHLEY DR, #109 PANAMA CITY BEACH, FL 32413	Claim Number: 20127 Claim Date: 12/10/2021 Debtor: BREVARD OAKS CENTER, LLC
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UNSECURED	Claimed:	\$151.63
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BABER, ROSELLA C/O BARBARA MARTENSEN, PR 919 N MARKET ST, STE 1410 WILMINGTON, DE 19801-3046	Claim Number: 20020 Claim Date: 11/15/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$400,000.00
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BALUCH, NATALIA C/O LILLIAN FOY, PR 919 N MARKET ST, STE 1410 WILMINGTON, DE 19801-3046	Claim Number: 20030 Claim Date: 11/17/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$46,000.00
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BANE, SHARON C/O ANTHONY & PARTNERS LLC ATTN JOHN A ANTHONY 100 S ASHLEY DR, STE 1600 TAMPA, FL 33602	Claim Number: 20003 Claim Date: 11/15/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$295,000.00
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

BAPTIST HOSPITAL, INC.
CECILY M. PARKER
501 COMMENDENCIA ST.
PENSACOLA, FL 32502

Claim Number: 20429
Claim Date: 01/03/2022
Debtor: FL HUD ROSEWOOD, LLC

UNSECURED Claimed: \$21,642.75

BAPTIST HOSPITAL, INC.
CECILY M. PARKER
501 COMMENDENCIA ST.
PENSACOLA, FL 32502

Claim Number: 20430
Claim Date: 01/03/2022
Debtor: NF PENSACOLA MANOR, LLC

UNSECURED Claimed: \$14,593.89

BAPTIST HOSPITAL, INC.
CECILY M. PARKER
BEGGS & LANE
501 COMMENDENCIA ST.
PENSACOLA, FL 32502

Claim Number: 20431
Claim Date: 01/03/2022
Debtor: FL HUD BAYBREEZE, LLC

UNSECURED Claimed: \$18,912.64

BAPTIST HOSPITAL, INC.
CECILY M. PARKER
501 COMMENDENCIA ST.
PENSACOLA, FL 32502

Claim Number: 20432
Claim Date: 01/03/2022
Debtor: FL HUD BAYSIDE, LLC

UNSECURED Claimed: \$4,231.12

BAPTIST HOSPITAL, INC.
CECILY M. PARKER
BEGGS & LANE
501 COMMENDENCIA ST.
PENSACOLA, FL 32502

Claim Number: 20434
Claim Date: 01/03/2022
Debtor: FL HUD PENSACOLA, LLC

UNSECURED Claimed: \$6,256.66

GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

BAPTIST HOSPITAL, INC.
 CECILY M. PARKER
 BEGGS & LANE
 501 COMMENDENCIA ST.
 PENSACOLA, FL 32502

Claim Number: 20435
 Claim Date: 01/03/2022
 Debtor: FL HUD SILVERCREST, LLC

UNSECURED Claimed: \$4,927.71

BAPTIST HOSPITAL, INC.
 CECILY M. PARKER
 BEGGS & LANE
 501 COMMENDENCIA ST.
 PENSACOLA, FL 32502

Claim Number: 20436
 Claim Date: 01/03/2022
 Debtor: NF ESCAMBIA, LLC

UNSECURED Claimed: \$45,372.75

BAPTIST HOSPITAL, INC.
 CECILY M. PARKER
 BEGGS & LANE
 501 COMMENDENCIA ST.
 PENSACOLA, FL 32502

Claim Number: 20437
 Claim Date: 01/03/2022
 Debtor: NF NINE MILE, LLC

UNSECURED Claimed: \$14,354.64

BARNES REFRIGERATION INC
 81 HANNAH RD
 MERIGOLD, MS 38759

Claim Number: 92
 Claim Date: 11/18/2021
 Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED Claimed: \$7,674.58

BARNETT, BRETT
 308 WAHOO RD, #27286
 PANAMA CITY BEACH, FL 32408

Claim Number: 20037
 Claim Date: 11/18/2021
 Debtor: GCH MANAGEMENT SERVICES, LLC

PRIORITY Claimed: \$13,650.00

UNSECURED Claimed: \$101,350.00

GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

BARTOSZEWICZ, CAROLYN
8022 HEIRLOOM DR
PENSACOLA, FL 32514

Claim Number: 291
Claim Date: 12/21/2021
Debtor: NF PENSACOLA MANOR, LLC

UNSECURED	Claimed:	\$2,519.81	Scheduled:	\$2,519.81
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BASS-UNITED FIRE & SECURITY SYSTEMS
3000 GATEWAY DR
POMPANO BEACH, FL 33069

Claim Number: 20052
Claim Date: 11/19/2021
Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED	Claimed:	\$2,952.26
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BATES, EUGENE
1608 MARTIN LUTHER KING
SHELBY, MS 38774

Claim Number: 118
Claim Date: 11/22/2021
Debtor: GULF COAST HEALTH CARE, LLC

PRIORITY	Claimed:	\$6,300.00
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BATES, EUGENE
1608 MARTIN LUTHER KING DR
SHELBY, MS 38774

Claim Number: 260
Claim Date: 12/14/2021
Debtor: MS SHELBY, LLC

UNSECURED	Claimed:	\$6,300.00	Scheduled:	\$5,000.00
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BEASLEY, MONA
C/O WHIBBS STONE BARNETT
ATTN SCOTT STONE, ESQ
801 W ROMANA ST, UNIT C
PENSACOLA, FL 32502

Claim Number: 20305
Claim Date: 12/20/2021
Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED	Claimed:	\$0.00	UNDET
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

BEASLEY, MONA C/O WHIBBS STONE BARNETT ATTN S SCOTT STONE, ESQ 801 W ROMANA ST PENSACOLA, FL 32502	Claim Number: 20306 Claim Date: 12/20/2021 Debtor: FL HUD PENSACOLA, LLC
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UNSECURED	Claimed:	\$0.00	UNDET
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BELL, JOHN C/O GEORGE F HOLLOWELL JR PO DRAWER 1407 GREENVILLE, MS 38702	Claim Number: 20300 Claim Date: 12/16/2021 Debtor: MS SHELBY, LLC
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UNSECURED	Claimed:	\$75,000.00
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BERNER, HELENE AND IRWIN 8751 W BROWARD BLVD, STE 404 FORT LAUDERDALE, FL 33324	Claim Number: 19 Claim Date: 10/25/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$40,000.00
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BIERFREIND, ADRIENNE 6738 E CISERON BOYNTON BEACH, FL 33437	Claim Number: 139 Claim Date: 12/02/2021 Debtor: SF BOYNTON, LLC
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UNSECURED	Claimed:	\$2,345.00
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BOLIVAR COUNTY TAX COLLECTOR PO BOX 248 CLEVELAND, MS 38762	Claim Number: 394 Claim Date: 12/30/2021 Debtor: GULF COAST HEALTH CARE, LLC
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PRIORITY	Claimed:	\$8,872.38	Scheduled:	\$0.00	UNLIQ
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GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

BRESSAN, YOLEN RAMON 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20168 Claim Date: 12/11/2021 Debtor: MF HALIFAX, LLC
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UNSECURED	Claimed: \$10,000,000.00
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BRESSAN, YOLEN RAMON 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20169 Claim Date: 12/11/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed: \$10,000,000.00
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BRESSAN, YOLEN RAMON 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20170 Claim Date: 12/11/2021 Debtor: FLORIDA FACILITIES, LLC
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UNSECURED	Claimed: \$1,000,000.00
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BREVARD COUNTY TAX COLLECTOR ATTN LISA CULLEN, CFC PO BOX 2500 TITUSVILLE, FL 32781-2500	Claim Number: 114 Claim Date: 11/22/2021 Debtor: BREVARD OAKS CENTER, LLC
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SECURED	Claimed: \$2,640.56 UNLIQ
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BREVARD COUNTY TAX COLLECTOR ATTN LISA CULLEN, CFC PO BOX 2500 TITUSVILLE, FL 32781-2500	Claim Number: 115 Claim Date: 11/22/2021 Debtor: BREVARD OAKS CENTER, LLC
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SECURED	Claimed: \$1,068.38 UNLIQ
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

BRIGGS HEALTHCARE
7887 UNIVERSITY BLVD
CLIVE, IA 50325

Claim Number: 322
Claim Date: 12/21/2021
Debtor: FL HUD DESTIN, LLC

UNSECURED Claimed: \$12,207.42 Scheduled: \$279.34

BRISK COFFEE ROASTERS
402 N 22ND ST
TAMPA, FL 33605

Claim Number: 48
Claim Date: 11/08/2021
Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED Claimed: \$19,111.20

BROWNING'S PHARMACY AND HEALTH CARE INC
141 E HIBISCUS BLVD
MELBOURNE, FL 32901

Claim Number: 90
Claim Date: 11/18/2021
Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED Claimed: \$137.65

BUCK, DERRIS
DAPHNY BUCK, AS POA
C/O COZEN O'CONNOR;THOMAS J FRANCELLA JR
1201 N MARKET ST, STE 1001
WILMINGTON, DE 19801

Claim Number: 193
Claim Date: 12/08/2021
Debtor: FL HUD MARGATE, LLC

UNSECURED Claimed: \$150,000.00 Scheduled: \$150,000.00

BURT, MARIAH
2926 RHYTHM ST
PENSACOLA, FL 32505

Claim Number: 134
Claim Date: 11/29/2021
Debtor: GULF COAST HEALTH CARE, LLC

PRIORITY Claimed: \$10,000.00

GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

BUSH, JAMES AND MARGARET C/O BEGGS & LANE RLLP ATTN J NIXON DANIEL III, ESQ 501 COMMENDENCIA ST PENSACOLA, FL 32502	Claim Number: 20321 Claim Date: 12/22/2021 Debtor: NF CHIPOLA, LLC
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UNSECURED	Claimed:	\$4,000,000.00 UNLIQ
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CAROLYN NEAL 1359 SOTO GRAND BLVD EULESS, TX 76040	Claim Number: 397 Claim Date: 01/03/2021 Debtor: GULF COAST HEALTH CARE, LLC
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PRIORITY	Claimed:	\$0.00 UNDET
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CARR, DONALD C JR C/O RICHARD T CARR, PR 919 N MARKET ST, STE 1410 WILMINGTON, DE 19801-3046	Claim Number: 20010 Claim Date: 11/15/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$100,000.00
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CASON, SIDNEY C/O TRACY CHRISTIAN, PR 919 N MARKET ST, STE 1410 WILMINGTON, DE 19801	Claim Number: 20042 Claim Date: 11/18/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$350,000.00
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CATHY SHEA IN HER IND CAPACITY AND AS PR FOR THE ESTATE OF ROBERT SELF C/O BEGGS & LANE RLLP; J NIXON DANIEL III 501 COMMENDENCIA ST PENSACOLA, FL 32502	Claim Number: 380 Claim Date: 12/27/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$750,000.00
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GULF COAST HEALTH CARE, LLC
Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

CCSG INC 116 MIMOSA DR THOMASVILLE, GA 31792	Claim Number: 46 Claim Date: 11/08/2021 Debtor: SC-GA2018 COBBLESTONE REHABILITATION
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PRIORITY	Claimed:	\$75.00
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CENTERPOINT ENERGY PO BOX 1700 HOUSTON, TX 77251	Claim Number: 6 Claim Date: 10/18/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$3,127.94
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CENTRAL TRIANGLE EQUIPMENT INC 4800 N HWY 19A MOUNT DORA, FL 32757	Claim Number: 70 Claim Date: 11/08/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$625.30
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CENTRAL TRIANGLE EQUIPMENT INC 4800 N HWY 19A MOUNT DORA, FL 32757	Claim Number: 124 Claim Date: 11/18/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$625.30
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CHAMBERS, MICHAEL WRIGHT 523 N SPRING ST PENSACOLA, FL 32501	Claim Number: 20062 Claim Date: 11/26/2021 Debtor: GULF COAST HEALTH CARE, LLC
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PRIORITY	Claimed:	\$12,000.00
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GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

CHINTANADILOK, JIRAYOS 4296 5TH AVE MARIANNA, FL 32446	Claim Number: 372 Claim Date: 12/23/2021 Debtor: NF CHIPOLA, LLC
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PRIORITY	Claimed:	\$10,838.71	Scheduled:	\$10,838.71
UNSECURED				

CILINKSI, ANNA C/O BEVERLY REINL, PR 919 N MARKET ST, STE 1410 WILMINGTON, DE 19801-3046	Claim Number: 20005 Claim Date: 11/15/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$55,000.00
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CIRCLESCAPES INC 2609 HERSCHEL ST JACKSONVILLE, FL 32204	Claim Number: 20093 Claim Date: 12/07/2021 Debtor: FL HUD BAYSIDE, LLC
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UNSECURED	Claimed:	\$1,282.50
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CIRCLESCAPES INC 2609 HERSCHEL ST JACKSONVILLE, FL 32204	Claim Number: 20094 Claim Date: 12/07/2021 Debtor: NF NINE MILE, LLC
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UNSECURED	Claimed:	\$1,282.50
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CIRCLESCAPES INC 2609 HERSCHEL ST JACKSONVILLE, FL 32204	Claim Number: 20095 Claim Date: 12/07/2021 Debtor: SC-GA2018 COBBLESTONE REHABILITATION
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UNSECURED	Claimed:	\$1,282.50
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CIRCLESCAPES INC 2609 HERSCHEL ST JACKSONVILLE, FL 32204		Claim Number: 20096 Claim Date: 12/07/2021 Debtor: FL HUD DESTIN, LLC
UNSECURED	Claimed:	\$1,282.50
CIRCLESCAPES INC 2609 HERSCHEL ST JACKSONVILLE, FL 32204		Claim Number: 20097 Claim Date: 12/07/2021 Debtor: FL HUD PENSACOLA, LLC
UNSECURED	Claimed:	\$1,282.50
CIRCLESCAPES INC 2609 HERSCHEL ST JACKSONVILLE, FL 32204		Claim Number: 20098 Claim Date: 12/07/2021 Debtor: FL HUD ROSEWOOD, LLC
UNSECURED	Claimed:	\$1,282.50
CIRCLESCAPES INC 2609 HERSCHEL ST JACKSONVILLE, FL 32204		Claim Number: 20099 Claim Date: 12/07/2021 Debtor: NF ESCAMBIA, LLC
UNSECURED	Claimed:	\$1,282.50
CIRCLESCAPES INC 2609 HERSCHEL ST JACKSONVILLE, FL 32204		Claim Number: 20100 Claim Date: 12/07/2021 Debtor: FL HUD BAYBREEZE, LLC
UNSECURED	Claimed:	\$1,282.50

GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

CITY OF CRESTVIEW
198 N WILSON ST
CRESTVIEW, FL 32536

Claim Number: 131
Claim Date: 11/29/2021
Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED Claimed: \$5,220.23

CITY OF MARGATE, FLORIDA
ATTN CITY ATTORNEY'S OFFICE
5790 MARGATE BLVD
MARGATE, FL 33063

Claim Number: 20081
Claim Date: 12/02/2021
Debtor: GULF COAST HEALTH CARE, LLC

SECURED Claimed: \$19,917.36

CITY OF MARIANNA
PO BOX 936
MARIANNA, FL 32447

Claim Number: 20102
Claim Date: 12/07/2021
Debtor: NF CHIPOLA, LLC

UNSECURED Claimed: \$1,673.15

CITY OF PANAMA CITY
501 HARRISON AVE
PANAMA CITY, FL 32401

Claim Number: 292
Claim Date: 12/21/2021
Debtor: NF PANAMA, LLC

UNSECURED Claimed: \$78.20

CITY OF PENSACOLA
ATTN JOHN MADDEN
222 W MAIN ST
PENSACOLA, FL 32502

Claim Number: 94
Claim Date: 11/19/2021
Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED Claimed: \$1,621.70

GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

CITY OF PENSACOLA
ATTN JOHN MADDEN
222 W MAIN ST
PENSACOLA, FL 32502

Claim Number: 125
Claim Date: 11/26/2021
Debtor: FL HUD PENSACOLA, LLC

UNSECURED Claimed: \$4,115.40

CITY OF PENSACOLA
ATTN JOHN MADDEN
222 W MAIN ST
PENSACOLA, FL 32502

Claim Number: 126
Claim Date: 11/26/2021
Debtor: FL HUD ROSEWOOD, LLC

UNSECURED Claimed: \$7,518.58

CITY OF PENSACOLA
ATTN JOHN MADDEN
222 W MAIN ST
PENSACOLA, FL 32502

Claim Number: 127
Claim Date: 11/26/2021
Debtor: NF NINE MILE, LLC

UNSECURED Claimed: \$2,522.98

CITY OF PENSACOLA
ATTN JOHN MADDEN
222 W MAIN ST
PENSACOLA, FL 32502

Claim Number: 128
Claim Date: 11/26/2021
Debtor: NF PENSACOLA MANOR, LLC

UNSECURED Claimed: \$1,751.50

CITY OF PENSACOLA
ATTN JOHN MADDEN
222 W MAIN ST
PENSACOLA, FL 32502

Claim Number: 129
Claim Date: 11/26/2021
Debtor: NF ESCAMBIA, LLC

UNSECURED Claimed: \$2,377.70

GULF COAST HEALTH CARE, LLC
Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

CITY OF WINTER PARK 401 S PARK AVE WINTER PARK, FL 32789-4386	Claim Number: 284 Claim Date: 12/20/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$43,748.76
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CLARK, JANIE 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20171 Claim Date: 12/11/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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CLARK, JANIE 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20172 Claim Date: 12/11/2021 Debtor: NF BRYNWOOD, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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CLARK, JANIE 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20173 Claim Date: 12/11/2021 Debtor: HUD FACILITIES, LLC
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UNSECURED	Claimed:	\$1,000,000.00
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CLARK, JANIE 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20174 Claim Date: 12/11/2021 Debtor: GCH MANAGEMENT SERVICES, LLC
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UNSECURED	Claimed:	\$1,000,000.00
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GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

CLARK, JANIE 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20175 Claim Date: 12/11/2021 Debtor: PENSACOLA ADMINISTRATIVE SERVICES, LLC
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UNSECURED	Claimed:	\$1,000,000.00
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CMS PROFESSIONAL TRANSPORT INC PO BOX 2227 LAKE CITY, FL 32056	Claim Number: 20069 Claim Date: 11/30/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$31,605.93
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COAST DIAGNOSTICS LLC PO BOX 8428 MOBILE, AL 36689	Claim Number: 20060 Claim Date: 11/23/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$189,372.99
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COASTAL DOORS 5872 NW 54 CIR CORAL SPRINGS, FL 33067	Claim Number: 226 Claim Date: 12/13/2021 Debtor: FL HUD MARGATE, LLC
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UNSECURED	Claimed:	\$2,025.00	Scheduled:	\$2,025.00
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COASTAL DOORS LLC 5872 NW 54 CIR CORAL SPRINGS, FL 33067	Claim Number: 1 Claim Date: 10/25/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$2,025.00
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GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

COASTAL DOORS LLC 5872 NW 54 CIR CORAL SPRINGS, FL 33067	Claim Number: 227 Claim Date: 12/13/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$2,025.00
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COASTAL HEALTH SYSTEMS OF BREVARD INC 486 GUS HIPPI BLVD ROCKLEDGE, FL 32955	Claim Number: 20362 Claim Date: 12/27/2021 Debtor: BREVARD OAKS CENTER, LLC
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UNSECURED	Claimed:	\$7,040.00
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COASTAL VASCULAR AND INTERVENTIONAL LLC PO BOX 11982 PENSACOLA, FL 32524-1982	Claim Number: 264 Claim Date: 12/17/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$18,827.88
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COIN LAUNDRY EQUIPMENT CO 1626 TRADEWINDS DR GULF BREEZE, FL 32563	Claim Number: 324 Claim Date: 12/22/2021 Debtor: SC-GA2018 COBBLESTONE REHABILITATION
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UNSECURED	Claimed:	\$570.52	Scheduled:	\$570.52
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COIN LAUNDRY EQUIPMENT CO 1626 TRADEWINDS DR GULF BREEZE, FL 32563	Claim Number: 327 Claim Date: 12/22/2021 Debtor: MS SHELBY, LLC
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UNSECURED	Claimed:	\$679.12	Scheduled:	\$679.12
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

COLLINS, LOIS C/O KAY WILHELM, PR 919 N MARKET ST, STE 1410 WILMINGTON, DE 19801-3046	Claim Number: 20028 Claim Date: 11/17/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$51,500.00
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COLVIN, SANDRA 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20176 Claim Date: 12/11/2021 Debtor: FL HUD BAYSIDE, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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COLVIN, SANDRA 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20177 Claim Date: 12/11/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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COLVIN, SANDRA 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20178 Claim Date: 12/11/2021 Debtor: HUD FACILITIES, LLC
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UNSECURED	Claimed:	\$1,000,000.00
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COLVIN, SANDRA 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20179 Claim Date: 12/11/2021 Debtor: GCH MANAGEMENT SERVICES, LLC
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UNSECURED	Claimed:	\$1,000,000.00
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

COMFORT TEMP COMPANY
4301 NW 6TH ST
GAINESVILLE, FL 32609

Claim Number: 20395
Claim Date: 12/30/2021
Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED Claimed: \$6,589.50

COMMERCIAL & COIN LAUNDRY
1626 TRADEWINDS DR
GULF BREEZE, FL 32563

Claim Number: 328
Claim Date: 12/22/2021
Debtor: FL HUD ROSEWOOD, LLC

UNSECURED Claimed: \$317.39 Scheduled: \$317.39

COMMERCIAL & COIN LAUNDRY
1626 TRADEWINDS DR
GULF BREEZE, FL 32563

Claim Number: 329
Claim Date: 12/22/2021
Debtor: SF BREVARD, LLC

UNSECURED Claimed: \$231.29 Scheduled: \$231.29

COMMERCIAL & COIN LAUNDRY EQUIP
1626 TRADEWINDS DR
GULF BREEZE, FL 32563

Claim Number: 330
Claim Date: 12/22/2021
Debtor: MS HUD PINE VIEW, LLC

UNSECURED Claimed: \$15,842.42 Scheduled: \$15,842.42

COMMERCIAL & COIN LAUNDRY EQUIP
1626 TRADEWINDS DR
GULF BREEZE, FL 32563

Claim Number: 331
Claim Date: 12/22/2021
Debtor: NF NINE MILE, LLC

UNSECURED Claimed: \$200.25 Scheduled: \$200.25

GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

COMMERCIAL & COIN LAUNDRY EQUIP
1626 TRADEWINDS DR
GULF BREEZE, FL 32563

Claim Number: 333
Claim Date: 12/22/2021
Debtor: NF PENSACOLA MANOR, LLC

UNSECURED	Claimed:	\$243.20	Scheduled:	\$243.20
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COMMERCIAL & COIN LAUNDRY EQUIPMENT
1626 TRADEWINDS DR
GULF BREEZE, FL 32563

Claim Number: 325
Claim Date: 12/22/2021
Debtor: MS SINGING, LLC

UNSECURED	Claimed:	\$369.70	Scheduled:	\$369.70
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COMMERCIAL & COIN LAUNDRY EQUIPMENT
1626 TRADEWINDS DR
GULF BREEZE, FL 32563

Claim Number: 326
Claim Date: 12/22/2021
Debtor: MS HUD DIXIE, LLC

UNSECURED	Claimed:	\$1,741.53	Scheduled:	\$1,741.53
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COMMERCIAL & COIN LAUNDRY EQUIPMENT
1626 TRADEWINDS DR
GULF BREEZE, FL 32563

Claim Number: 332
Claim Date: 12/22/2021
Debtor: FL HUD BAYBREEZE, LLC

UNSECURED	Claimed:	\$22,258.36	Scheduled:	\$22,258.36
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COMMERCIAL & COIN LAUNDRY EQUIPMENT
1626 TRADEWINDS DR
GULF BREEZE, FL 32563

Claim Number: 335
Claim Date: 12/22/2021
Debtor: MS HUD OCEAN SPRINGS, LLC

UNSECURED	Claimed:	\$400.50	Scheduled:	\$400.50
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GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

COMMERCIAL DOOR SYSTEMS 612 W ROMANA ST PENSACOLA, FL 32502	Claim Number: 20068 Claim Date: 11/30/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$1,509.08
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COMMUNICATION ACCESS SERVICES INC 927 S STATE RD 7 PLANTATION, FL 33317	Claim Number: 89 Claim Date: 11/16/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$7,984.27
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COOPER, ANGELA 12 CARMELITA COVE SHAW, MS 38773	Claim Number: 20038 Claim Date: 11/18/2021 Debtor: GULF COAST HEALTH CARE, LLC
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PRIORITY	Claimed:	\$18,000.00
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UNSECURED		Scheduled:	\$18,000.00
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COPELAND, ALESHA 460 BARNWELL LN CENTURY, FL 32535	Claim Number: 20087 Claim Date: 12/04/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$0.00 UNDET
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CORDOVA REHAB LLC C/O LOCKE LORD LLP ATTN DAVID L SWANSON 2800 ROSS AVE, STE 2200 DALLAS, TX 75201	Claim Number: 20333 Claim Date: 12/23/2021 Debtor: PENSACOLA ADMINISTRATIVE SERVICES, LLC
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SECURED	Claimed:	\$49,412,454.87 UNLIQ
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

CORDOVA REHAB LLC C/O LOCKE LORD LLP ATTN DAVID L SWANSON 2800 ROSS AVE, STE 2200 DALLAS, TX 75201	Claim Number: 20336 Claim Date: 12/23/2021 Debtor: GULF COAST MASTER TENANT I, LLC
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SECURED	Claimed:	\$49,412,454.87 UNLIQ
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CORDOVA REHAB LLC C/O LOCKE LORD LLP ATTN DAVID L SWANSON 2800 ROSS AVE, STE 2200 DALLAS, TX 75201	Claim Number: 20339 Claim Date: 12/23/2021 Debtor: GULF COAST MASTER TENANT II, LLC
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SECURED	Claimed:	\$49,412,454.87 UNLIQ
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CORDOVA REHAB LLC C/O LOCKE LORD LLP ATTN DAVID L SWANSON 2800 ROSS AVE, STE 2200 DALLAS, TX 75201	Claim Number: 20342 Claim Date: 12/23/2021 Debtor: HUD FACILITIES, LLC
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SECURED	Claimed:	\$49,412,454.87 UNLIQ	Scheduled:	\$49,402,516.10
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CORDOVA REHAB LLC C/O LOCKE LORD LLP ATTN DAVID L SWANSON 2800 ROSS AVE, STE 2200 DALLAS, TX 75201	Claim Number: 20345 Claim Date: 12/23/2021 Debtor: HUD FACILITIES, LLC
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SECURED	Claimed:	\$49,412,454.87 UNLIQ
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CORDOVA REHAB LLC C/O LOCKE LORD LLP ATTN DAVID L SWANSON 2800 ROSS AVE, STE 2200 DALLAS, TX 75201	Claim Number: 20348 Claim Date: 12/23/2021 Debtor: FLORIDA FACILITIES, LLC
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SECURED	Claimed:	\$49,412,454.87 UNLIQ
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GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

CORDOVA REHAB LLC C/O LOCKE LORD LLP ATTN DAVID L SWANSON 2800 ROSS AVE, STE 2200 DALLAS, TX 75201	Claim Number: 20351 Claim Date: 12/23/2021 Debtor: GULF COAST HEALTH CARE, LLC
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SECURED Claimed: CORDOVA REHAB LLC C/O LOCKE LORD LLP ATTN DAVID L SWANSON 2800 ROSS AVE, STE 2200 DALLAS, TX 75201	\$49,412,454.87 UNLIQ Claim Number: 20354 Claim Date: 12/23/2021 Debtor: GCH MANAGEMENT SERVICES, LLC
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SECURED Claimed: CORDOVA REHAB LLC C/O LOCKE LORD LLP ATTN DAVID L SWANSON 2800 ROSS AVE, STE 2200 DALLAS, TX 75201	\$49,412,454.87 UNLIQ Claim Number: 20357 Claim Date: 12/23/2021 Debtor: GULF COAST MASTER TENANT HOLDINGS, LLC
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SECURED Claimed: CORWN BAKERIES LLC 2975 ARMORY DR NASHVILLE, TN 37204	\$49,412,454.87 UNLIQ Claim Number: 29 Claim Date: 11/02/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED Claimed: COX LAWN & LANDSCAPE INC ATTN BRETT A HYDE 1990 W NEW HAVEN AVE, 2ND FL MELBOURNE, FL 32904	\$44,664.00 Claim Number: 205 Claim Date: 12/01/2021 Debtor: GULF COAST HEALTH CARE, LLC
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SECURED Claimed:	\$20,115.00
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CRAFT, SHIRLEY 919 N MARKET ST, STE 1410 WILMINGTON, DE 19801-3046		Claim Number: 20012 Claim Date: 11/15/2021 Debtor: GULF COAST HEALTH CARE, LLC	
UNSECURED	Claimed:	\$75,000.00	
CRAWFORD, MARIAH 1327 MYRA ST SW LIVE OAK, FL 32060		Claim Number: 178 Claim Date: 12/09/2021 Debtor: GULF COAST HEALTH CARE, LLC	
PRIORITY	Claimed:	\$1,600.00	
CRD CONSULTANTS LLC 341 S GARCON POINT RD MILTON, FL 32583		Claim Number: 285 Claim Date: 12/20/2021 Debtor: NF PENSACOLA MANOR, LLC	
PRIORITY	Claimed:	\$5,000.00	
UNSECURED		Scheduled:	\$5,000.00
CRD CONSULTANTS LLC 341 S GARCON POINT RD MILTON, FL 32583		Claim Number: 286 Claim Date: 12/20/2021 Debtor: FL HUD ROSEWOOD, LLC	
PRIORITY	Claimed:	\$4,500.00	
UNSECURED		Scheduled:	\$4,500.00
CRD CONSULTANTS LLC 341 S GARCON POINT RD MILTON, FL 32583		Claim Number: 287 Claim Date: 12/20/2021 Debtor: NF ESCAMBIA, LLC	
PRIORITY	Claimed:	\$20,000.00	
UNSECURED		Scheduled:	\$20,000.00

GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

CREIGHTON, NORMA ROSITA
17596 1ST ST E
REDINGTON SHORES, FL 33708

Claim Number: 20084
Claim Date: 12/02/2021
Debtor: GULF COAST HEALTH CARE, LLC

PRIORITY Claimed: \$9,500.00

CRESCO INC
PO BOX 6827
GULFPORT, MS 39506

Claim Number: 72
Claim Date: 11/12/2021
Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED Claimed: \$210.83

CROSBY, JANET
105 W HERNANDEZ ST
PENSACOLA, FL 32501

Claim Number: 294
Claim Date: 12/21/2021
Debtor: FL HUD BAYSIDE, LLC

UNSECURED Claimed: \$6,004.46

CROWE LLP
320 E JEFFERSON BLVD
PO BOX 7
SOUTH BEND, IN 46624-0007

Claim Number: 20320
Claim Date: 12/22/2021
Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED Claimed: \$51,276.25 Scheduled: \$66,500.00

CROWN HEALTH CARE LAUNDRY SERVICES
ATTN CLIFF HAIGLER
25 W CEDAR ST, STE 405
PENSACOLA, FL 32502

Claim Number: 20085
Claim Date: 12/02/2021
Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED Claimed: \$50,819.63

GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

CUEVAS, ERMELINDO C/O COZEN O'CONNOR ATTN THOMAS J FRANCELLA JR 1201 N MARKET ST, STE 1001 WILMINGTON, DE 19801	Claim Number: 196 Claim Date: 12/08/2021 Debtor: FL HUD MARGATE, LLC
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UNSECURED	Claimed: \$350,000.00
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CURRY, BARBARA C/O PAUL & PERKINS PA ATTN JASON A PAUL 711 N ORLANDO AVE, STE 202 MAITLAND, FL 32751	Claim Number: 20283 Claim Date: 12/15/2021 Debtor: MF WINTER PARK, LLC
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UNSECURED	Claimed: \$500,000.00 UNLIQ
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CURTIS, LUBERTA C/O GEORGE HOLLOWELL PO DRAWER 1407 GREENVILLE, MS 38702	Claim Number: 20289 Claim Date: 12/15/2021 Debtor: MS SHELBY, LLC
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UNSECURED	Claimed: \$0.00 UNDET
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CYPRESS MEDICAL LLC 1270 N WICKHAM RD, 16-308 MELBOURNE, FL 32935	Claim Number: 179 Claim Date: 12/09/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed: \$4,020.00
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DALLAS, MARY C/O JENNIFER MULLER, PR 919 N MARKET ST, STE 1410 WILMINGTON, DE 19801-3046	Claim Number: 20007 Claim Date: 11/15/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed: \$400,000.00
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GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

DANNY DEATON BIOMEDICAL SERVICES LLC
 980 PINOAK LN
 CANTONMENT, FL 32533

Claim Number: 283
 Claim Date: 12/20/2021
 Debtor: NF SUWANNEE, LLC

UNSECURED Claimed: \$5,751.25 Scheduled: \$5,751.25

DANNY MILLER PLUMBING INC
 PO BOX 2026
 GULFPORT, MS 39505

Claim Number: 117
 Claim Date: 11/22/2021
 Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED Claimed: \$3,150.00

DEEP SOUTH CONTAINERS
 1571 EVERS HVN
 CANTONMENT, FL 32533

Claim Number: 20066
 Claim Date: 11/29/2021
 Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED Claimed: \$521.40

DELTA HEALTH GROUP LLC
 C/O LOCKE LORD LLP
 ATTN DAVID L SWANSON
 2800 ROSS AVE, STE 2200
 DALLAS, TX 75201

Claim Number: 20332
 Claim Date: 12/23/2021
 Debtor: PENSACOLA ADMINISTRATIVE SERVICES, LLC

SECURED Claimed: \$49,412,454.87 UNLIQ Scheduled: \$49,402,516.10

DELTA HEALTH GROUP LLC
 C/O LOCKE LORD LLP
 ATTN DAVID L SWANSON
 2800 ROSS AVE, STE 2200
 DALLAS, TX 75201

Claim Number: 20335
 Claim Date: 12/23/2021
 Debtor: GULF COAST MASTER TENANT I, LLC

SECURED Claimed: \$49,412,454.87 UNLIQ Scheduled: \$49,402,516.10

GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

DELTA HEALTH GROUP LLC C/O LOCKE LORD LLP ATTN DAVID L SWANSON 2800 ROSS AVE, STE 2200 DALLAS, TX 75201	Claim Number: 20338 Claim Date: 12/23/2021 Debtor: GULF COAST MASTER TENANT II, LLC
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SECURED	Claimed:	\$49,412,454.87	UNLIQ	Scheduled:	\$49,402,516.10
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DELTA HEALTH GROUP LLC C/O LOCKE LORD LLP ATTN DAVID L SWANSON 2800 ROSS AVE, STE 2200 DALLAS, TX 75201	Claim Number: 20341 Claim Date: 12/23/2021 Debtor: HUD FACILITIES, LLC
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SECURED	Claimed:	\$49,412,454.87	UNLIQ
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DELTA HEALTH GROUP LLC C/O LOCKE LORD LLP ATTN DAVID L SWANSON 2800 ROSS AVE, STE 2200 DALLAS, TX 75201	Claim Number: 20344 Claim Date: 12/23/2021 Debtor: HUD FACILITIES, LLC
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SECURED	Claimed:	\$49,412,454.87	UNLIQ	Scheduled:	\$49,402,516.10
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DELTA HEALTH GROUP LLC C/O LOCKE LORD LLP ATTN DAVID L SWANSON 2800 ROSS AVE, STE 2200 DALLAS, TX 75201	Claim Number: 20347 Claim Date: 12/23/2021 Debtor: FLORIDA FACILITIES, LLC
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SECURED	Claimed:	\$49,412,454.87	UNLIQ	Scheduled:	\$49,402,516.10
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DELTA HEALTH GROUP LLC C/O LOCKE LORD LLP ATTN DAVID L SWANSON 2800 ROSS AVE, STE 2200 DALLAS, TX 75201	Claim Number: 20350 Claim Date: 12/23/2021 Debtor: GULF COAST HEALTH CARE, LLC
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SECURED	Claimed:	\$49,412,454.87	UNLIQ
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

DELTA HEALTH GROUP LLC C/O LOCKE LORD LLP ATTN DAVID L SWANSON 2800 ROSS AVE, STE 2200 DALLAS, TX 75201	Claim Number: 20353 Claim Date: 12/23/2021 Debtor: GCH MANAGEMENT SERVICES, LLC
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SECURED	Claimed:	\$49,412,454.87 UNLIQ
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DELTA HEALTH GROUP LLC C/O LOCKE LORD LLP ATTN DAVID L SWANSON 2800 ROSS AVE, STE 2200 DALLAS, TX 75201	Claim Number: 20356 Claim Date: 12/23/2021 Debtor: GULF COAST MASTER TENANT HOLDINGS, LLC
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SECURED	Claimed:	\$49,412,454.87 UNLIQ
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DIGI MAC SOLUTIONS INC 9800-D TOPANGA CANYON BLVD, #7 CHATSWORTH, CA 91311	Claim Number: 20291 Claim Date: 12/16/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$644.25
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DILORETO, SCOTT J 1613 E FISHER ST PENSACOLA, FL 32503	Claim Number: 20000 Claim Date: 11/15/2021 Debtor: GULF COAST HEALTH CARE, LLC Comments: POSSIBLY AMENDED BY 20049
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PRIORITY	Claimed:	\$10,000.00
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DILORETO, SCOTT J 1613 E FISHER ST PENSACOLA, FL 32503	Claim Number: 20049 Claim Date: 11/18/2021 Debtor: GULF COAST HEALTH CARE, LLC Comments: AMENDS CLAIM #20000
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PRIORITY	Claimed:	\$10,000.00
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

DIRECT SUPPLY INC 6635 W CHAMPIONS WAY MILWAUKEE, WI 53223	Claim Number: 232 Claim Date: 12/13/2021 Debtor: FL HUD BAYSIDE, LLC
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UNSECURED	Claimed:	\$7,146.01	Scheduled:	\$7,146.01
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DIRECT SUPPLY INC 6635 W CHAMPIONS WAY MILWAUKEE, WI 53223	Claim Number: 233 Claim Date: 12/13/2021 Debtor: SF CARNEGIE, LLC
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UNSECURED	Claimed:	\$35,026.67	Scheduled:	\$35,026.67
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DIRECT SUPPLY INC 6635 W CHAMPIONS WAY MILWAUKEE, WI 53223	Claim Number: 234 Claim Date: 12/13/2021 Debtor: NF PANAMA, LLC
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UNSECURED	Claimed:	\$20,488.04	Scheduled:	\$16,802.60
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DIRECT SUPPLY INC 6635 W CHAMPIONS WAY MILWAUKEE, WI 53223	Claim Number: 235 Claim Date: 12/13/2021 Debtor: NF CHIPOLA, LLC
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UNSECURED	Claimed:	\$9,600.62	Scheduled:	\$9,600.62
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DIRECT SUPPLY INC 6635 W CHAMPIONS WAY MILWAUKEE, WI 53223	Claim Number: 236 Claim Date: 12/13/2021 Debtor: FL HUD SILVERCREST, LLC
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UNSECURED	Claimed:	\$13,482.62	Scheduled:	\$9,333.56
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DIRECT SUPPLY INC 6635 W CHAMPIONS WAY MILWAUKEE, WI 53223		Claim Number: 237 Claim Date: 12/13/2021 Debtor: MS HUD BOYINGTON, LLC	
UNSECURED	Claimed:	\$10,281.70	Scheduled: \$10,281.70
DIRECT SUPPLY INC 6635 W CHAMPIONS WAY MILWAUKEE, WI 53223		Claim Number: 238 Claim Date: 12/13/2021 Debtor: MS LAKESIDE, LLC	
UNSECURED	Claimed:	\$4,166.98	Scheduled: \$4,166.98
DIRECT SUPPLY INC 6635 W CHAMPIONS WAY MILWAUKEE, WI 53223		Claim Number: 239 Claim Date: 12/13/2021 Debtor: MS HUD DIXIE, LLC	
UNSECURED	Claimed:	\$5,469.32	Scheduled: \$5,469.32
DIRECT SUPPLY INC 6635 W CHAMPIONS WAY MILWAUKEE, WI 53223		Claim Number: 240 Claim Date: 12/13/2021 Debtor: MS GREENBOUGH, LLC	
UNSECURED	Claimed:	\$8,029.75	Scheduled: \$8,029.75
DIRECT SUPPLY INC 6635 W CHAMPIONS WAY MILWAUKEE, WI 53223		Claim Number: 241 Claim Date: 12/13/2021 Debtor: GULF COAST HEALTH CARE, LLC	
UNSECURED	Claimed:	\$7,800.00	

GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

DIRECT SUPPLY INC
6635 W CHAMPIONS WAY
MILWAUKEE, WI 53223

Claim Number: 242
Claim Date: 12/13/2021
Debtor: SF BREVARD, LLC

UNSECURED Claimed: \$17,048.39 Scheduled: \$17,091.07

DIRECT SUPPLY INC
6635 W CHAMPIONS WAY
MILWAUKEE, WI 53223

Claim Number: 243
Claim Date: 12/13/2021
Debtor: MF WINTER PARK, LLC

UNSECURED Claimed: \$63,597.27 Scheduled: \$63,597.27

DIRECT SUPPLY INC
6635 W CHAMPIONS WAY
MILWAUKEE, WI 53223

Claim Number: 244
Claim Date: 12/13/2021
Debtor: FL HUD MARGATE, LLC

UNSECURED Claimed: \$12,763.17 Scheduled: \$12,763.17

DIRECT SUPPLY INC
6635 W CHAMPIONS WAY
MILWAUKEE, WI 53223

Claim Number: 245
Claim Date: 12/13/2021
Debtor: NF SUWANNEE, LLC

UNSECURED Claimed: \$14,600.05 Scheduled: \$14,600.05

DIRECT SUPPLY INC
6635 W CHAMPIONS WAY
MILWAUKEE, WI 53223

Claim Number: 246
Claim Date: 12/13/2021
Debtor: SC-GA2018 COBBLESTONE REHABILITATION

UNSECURED Claimed: \$10,994.95 Scheduled: \$10,689.38

GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

DIRECT SUPPLY INC
6635 W CHAMPIONS WAY
MILWAUKEE, WI 53223

Claim Number: 247
Claim Date: 12/13/2021
Debtor: MS SINGING, LLC

UNSECURED	Claimed:	\$13,157.38	Scheduled:	\$13,157.38
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DIRECT SUPPLY INC
6635 W CHAMPIONS WAY
MILWAUKEE, WI 53223

Claim Number: 248
Claim Date: 12/13/2021
Debtor: MS HUD OCEAN SPRINGS, LLC

UNSECURED	Claimed:	\$8,968.54	Scheduled:	\$8,813.41
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DIRECT SUPPLY INC
6635 W CHAMPIONS WAY
MILWAUKEE, WI 53223

Claim Number: 249
Claim Date: 12/13/2021
Debtor: MS HUD PINE VIEW, LLC

UNSECURED	Claimed:	\$7,106.23	Scheduled:	\$7,106.23
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DIRECT SUPPLY INC
6635 W CHAMPIONS WAY
MILWAUKEE, WI 53223

Claim Number: 250
Claim Date: 12/13/2021
Debtor: FL HUD PENSACOLA, LLC

UNSECURED	Claimed:	\$12,993.35	Scheduled:	\$12,903.04
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DIRECT SUPPLY INC
6635 W CHAMPIONS WAY
MILWAUKEE, WI 53223

Claim Number: 251
Claim Date: 12/13/2021
Debtor: SF LAKE PLACID ALF, LLC

UNSECURED	Claimed:	\$1,530.25	Scheduled:	\$1,530.25
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DIRECT SUPPLY INC 6635 W CHAMPIONS WAY MILWAUKEE, WI 53223		Claim Number: 252 Claim Date: 12/13/2021 Debtor: MS SHELBY, LLC	
UNSECURED	Claimed:	\$3,571.45	Scheduled: \$3,571.45
DIRECT SUPPLY INC 6635 W CHAMPIONS WAY MILWAUKEE, WI 53223		Claim Number: 253 Claim Date: 12/13/2021 Debtor: FL HUD ROSEWOOD, LLC	
UNSECURED	Claimed:	\$15,865.62	Scheduled: \$13,990.10
DIRECT SUPPLY INC 6635 W CHAMPIONS WAY MILWAUKEE, WI 53223		Claim Number: 254 Claim Date: 12/13/2021 Debtor: MF LAKE EUSTIS, LLC	
UNSECURED	Claimed:	\$31,298.16	Scheduled: \$31,203.90
DIRECT SUPPLY INC 6635 W CHAMPIONS WAY MILWAUKEE, WI 53223		Claim Number: 255 Claim Date: 12/13/2021 Debtor: BREVARD OAKS CENTER, LLC	
UNSECURED	Claimed:	\$22,340.35	
DIRECT SUPPLY INC 6635 W CHAMPIONS WAY MILWAUKEE, WI 53223		Claim Number: 256 Claim Date: 12/13/2021 Debtor: FL HUD BAYBREEZE, LLC	
UNSECURED	Claimed:	\$15,747.68	Scheduled: \$15,747.68

GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

DIRECT SUPPLY INC 6635 W CHAMPIONS WAY MILWAUKEE, WI 53223	Claim Number: 257 Claim Date: 12/13/2021 Debtor: NF PENSACOLA MANOR, LLC
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UNSECURED	Claimed:	\$5,863.15	Scheduled:	\$5,827.80
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DIRECT SUPPLY INC 6635 W CHAMPIONS WAY MILWAUKEE, WI 53223	Claim Number: 258 Claim Date: 12/13/2021 Debtor: NF ESCAMBIA, LLC
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UNSECURED	Claimed:	\$10,636.21	Scheduled:	\$10,636.21
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DIRECT SUPPLY INC 6635 W CHAMPIONS WAY MILWAUKEE, WI 53223	Claim Number: 259 Claim Date: 12/13/2021 Debtor: FL HUD DESTIN, LLC
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UNSECURED	Claimed:	\$26,254.99	Scheduled:	\$26,096.65
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DIRECTTV LLC C/O AMERICAN INFOSOURCE AS AGENT 4515 N SANTA FE AVE OKLAHOMA CITY, OK 73118	Claim Number: 17 Claim Date: 10/21/2021 Debtor: SF SALERNO, LLC
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UNSECURED	Claimed:	\$3,359.13
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DIRECTV LLC C/O AMERICAN INFOSOURCE AS AGENT 4515 N SANTA FE AVE OKLAHOMA CITY, OK 73118	Claim Number: 15 Claim Date: 10/21/2021 Debtor: NF WINDSOR, LLC
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UNSECURED	Claimed:	\$722.00
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GULF COAST HEALTH CARE, LLC
Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

DLF NO 3 LLC C/O LOCKE LORD LLP ATTN DAVID L SWANSON 2800 ROSS AVE, STE 2200 DALLAS, TX 75201	Claim Number: 78 Claim Date: 11/15/2021 Debtor: GULF COAST MASTER TENANT I, LLC
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UNSECURED	Claimed:	\$180,000.00
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DOUGLAS, ANNE F 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20182 Claim Date: 12/11/2021 Debtor: SF CARNEGIE, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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DOUGLAS, ANNE F 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20183 Claim Date: 12/11/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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DOUGLAS, ANNE F 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20184 Claim Date: 12/11/2021 Debtor: FLORIDA FACILITIES, LLC
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UNSECURED	Claimed:	\$1,000,000.00
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DOUGLAS, ANNE F 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20185 Claim Date: 12/11/2021 Debtor: GCH MANAGEMENT SERVICES, LLC
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UNSECURED	Claimed:	\$1,000,000.00
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

DRAKE, KRIS
9 MONTCLAIRE CT
HATTIESBURG, MS 39402

Claim Number: 20050
Claim Date: 11/19/2021
Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED	Claimed:	\$24,000.00	Scheduled:	\$24,000.00
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DRUG FREE WORKPLACES USA LLC
PO BOX 11096
PENSACOLA, FL 32524

Claim Number: 71
Claim Date: 11/08/2021
Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED	Claimed:	\$10,190.00
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DYSPHAGIA MANAGEMENT SYSTEMS LLC
ATTN CAROL WINCHESTER
5763 WILENA PL
SARASOTA, FL 34238

Claim Number: 30
Claim Date: 11/02/2021
Debtor: GULF COAST HEALTH CARE, LLC

PRIORITY	Claimed:	\$12,475.00
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UNSECURED	Claimed:	\$1,575.00
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EASTERN SHORE SWALLOWING DIAGNOSTICS LLC
8707 BAINBRIDGE DR
DAPHNE, AL 36526

Claim Number: 20053
Claim Date: 11/21/2021
Debtor: MS HUD OCEAN SPRINGS, LLC

PRIORITY	Claimed:	\$2,100.00
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UNSECURED	Claimed:	\$350.00	Scheduled:	\$2,100.00
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ECOLAB INC
1601 W DIEHL RD
NAPERVILLE, IL 60563

Claim Number: 20067
Claim Date: 11/29/2021
Debtor: NF SUWANNEE, LLC

UNSECURED	Claimed:	\$1,231.92
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GULF COAST HEALTH CARE, LLC
Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

EDGE INFORMATION MANAGEMENT INC 1682 W HIBISCUS BLVD MELBOURNE, FL 32901	Claim Number: 136 Claim Date: 11/29/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$5,492.64
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EDWARDS ROOFING COMPANY INC 18 W STUMPFIELD RD PENSACOLA, FL 32503	Claim Number: 147 Claim Date: 12/03/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$23,138.00
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EINSTEIN, ESTATE OF ROBERT F C/O WILKES & ASSOCIATES, P.A. ONE N. DALE MABRY, SUITE 800 TAMPA, FL 33609	Claim Number: 20419 Claim Date: 12/31/2021 Debtor: MF LAKE EUSTIS, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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EINSTEIN, ESTATE OF ROBERT F C/O WILKES & ASSOCIATES, P.A. ONE N. DALE MABRY, SUITE 800 TAMPA, FL 33609	Claim Number: 20420 Claim Date: 12/31/2021 Debtor: FLORIDA FACILITIES, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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EINSTEIN, ESTATE OF ROBERT F C/O WILKES & ASSOCIATES, P.A. ONE N. DALE MABRY, SUITE 800 TAMPA, FL 33609	Claim Number: 20421 Claim Date: 12/31/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

ELECTRONIC CONTROLS INC 1068 W CONGRESS ST BROOKHAVEN, MS 39601	Claim Number: 224 Claim Date: 12/13/2021 Debtor: MS GREENBOUGH, LLC
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UNSECURED	Claimed:	\$737.44	Scheduled:	\$737.44
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ELECTRONIC CONTROLS INC 1068 W CONGRESS ST BROOKHAVEN, MS 39601	Claim Number: 225 Claim Date: 12/13/2021 Debtor: MS SHELBY, LLC
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UNSECURED	Claimed:	\$1,001.14	Scheduled:	\$1,001.14
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EMERALD COAST UTILITIES AUTHORITY 9255 STURDEVANT ST PENSACOLA, FL 32514-7038	Claim Number: 20378 Claim Date: 12/29/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$271.15
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EMERALD COAST UTILITIES AUTHORITY 9255 STURDEVANT ST PENSACOLA, FL 32514-7038	Claim Number: 20379 Claim Date: 12/29/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$2,644.00
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EMERALD COAST UTILITIES AUTHORITY 9255 STURDEVANT ST PENSACOLA, FL 32514-7038	Claim Number: 20380 Claim Date: 12/29/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$996.49
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GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

EMERALD COAST UTILITIES AUTHORITY 9255 STURDEVANT ST PENSACOLA, FL 32514-7038	Claim Number: 20381 Claim Date: 12/29/2021 Debtor: GULF COAST HEALTH CARE, LLC Comments: POSSIBLY AMENDED BY 20385
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UNSECURED	Claimed:	\$3,571.00
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EMERALD COAST UTILITIES AUTHORITY 9255 STURDEVANT ST PENSACOLA, FL 32514-7038	Claim Number: 20382 Claim Date: 12/29/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$1,010.31
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EMERALD COAST UTILITIES AUTHORITY 9255 STURDEVANT ST PENSACOLA, FL 32514-7038	Claim Number: 20383 Claim Date: 12/29/2021 Debtor: GULF COAST HEALTH CARE, LLC Comments: POSSIBLY AMENDED BY 20384
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UNSECURED	Claimed:	\$5,121.47
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EMERALD COAST UTILITIES AUTHORITY 9255 STURDEVANT ST PENSACOLA, FL 32514-7038	Claim Number: 20384 Claim Date: 12/29/2021 Debtor: GULF COAST HEALTH CARE, LLC Comments: AMENDS CLAIM #20383
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UNSECURED	Claimed:	\$5,121.47
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EMERALD COAST UTILITIES AUTHORITY 9255 STURDEVANT ST PENSACOLA, FL 32514-7038	Claim Number: 20385 Claim Date: 12/29/2021 Debtor: GULF COAST HEALTH CARE, LLC Comments: AMENDS CLAIM #20381
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UNSECURED	Claimed:	\$3,571.00
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GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

EMPYRE LANDSCAPING INC ATTN AARON GIPSON SR 3601 OVERLAND DR PENSACOLA, FL 32504	Claim Number: 77 Claim Date: 11/15/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$22,350.00
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ESCAMBIA COUNTY TAX COLLECTOR ATTN SARAH S WALTON 25 W CEDAR ST, STE 550 PENSACOLA, FL 32502	Claim Number: 54 Claim Date: 11/08/2021 Debtor: GULF COAST HEALTH CARE, LLC Comments: Claim Out of Balance Claim out of balance
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PRIORITY	Claimed:	\$7,495.00	UNLIQ
SECURED	Claimed:	\$7,495.00	UNLIQ
TOTAL	Claimed:	\$7,495.00	UNLIQ

ESCAMBIA COUNTY TAX COLLECTOR ATTN SARAH S WALTON 25 W CEDAR ST, STE 550 PENSACOLA, FL 32502	Claim Number: 55 Claim Date: 11/08/2021 Debtor: NF NINE MILE, LLC Comments: Claim Out of Balance Claim out of balance
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PRIORITY	Claimed:	\$686.13	UNLIQ
SECURED	Claimed:	\$686.13	UNLIQ
TOTAL	Claimed:	\$686.13	UNLIQ

ESCAMBIA COUNTY TAX COLLECTOR ATTN SARAH S WALTON 25 W CEDAR ST, STE 550 PENSACOLA, FL 32502	Claim Number: 56 Claim Date: 11/08/2021 Debtor: NF PENSACOLA MANOR, LLC Comments: Claim Out of Balance Claim out of balance
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PRIORITY	Claimed:	\$6,121.44	UNLIQ
SECURED	Claimed:	\$6,121.44	UNLIQ
TOTAL	Claimed:	\$6,121.44	UNLIQ

ESCAMBIA COUNTY TAX COLLECTOR ATTN SARAH S WALTON 25 W CEDAR ST, STE 550 PENSACOLA, FL 32502		Claim Number: 57 Claim Date: 11/08/2021 Debtor: FL HUD PENSACOLA, LLC Comments: Claim Out of Balance Claim out of balance	
PRIORITY	Claimed:	\$5,088.18	UNLIQ
SECURED	Claimed:	\$5,088.18	UNLIQ
TOTAL	Claimed:	\$5,088.18	UNLIQ
ESCAMBIA COUNTY TAX COLLECTOR ATTN SARAH S WALTON 25 W CEDAR ST, STE 550 PENSACOLA, FL 32502		Claim Number: 58 Claim Date: 11/08/2021 Debtor: FL HUD BAYSIDE, LLC Comments: Claim Out of Balance Claim out of balance	
PRIORITY	Claimed:	\$4,480.58	UNLIQ
SECURED	Claimed:	\$4,480.58	UNLIQ
TOTAL	Claimed:	\$4,480.58	UNLIQ
ESCAMBIA COUNTY TAX COLLECTOR ATTN SARAH S WALTON 25 W CEDAR ST, STE 550 PENSACOLA, FL 32502		Claim Number: 59 Claim Date: 11/08/2021 Debtor: NF ESCAMBIA, LLC Comments: Claim Out of Balance Claim out of balance	
PRIORITY	Claimed:	\$5,168.65	UNLIQ
SECURED	Claimed:	\$5,168.65	UNLIQ
TOTAL	Claimed:	\$5,168.65	UNLIQ
ESCAMBIA COUNTY TAX COLLECTOR ATTN SARAH S WALTON 25 W CEDAR ST, STE 550 PENSACOLA, FL 32502		Claim Number: 60 Claim Date: 11/08/2021 Debtor: FL HUD ROSEWOOD, LLC Comments: Claim Out of Balance Claim out of balance	
PRIORITY	Claimed:	\$4,423.96	UNLIQ
SECURED	Claimed:	\$4,423.96	UNLIQ
TOTAL	Claimed:	\$4,423.96	UNLIQ

GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

ESTATE OF ALMA TOBAR C/O WILKES & ASSOCIATES PA 1 N DALE MABRY HIGHWAY SUITE 800 TAMPA, FL 33609	Claim Number: 20424 Claim Date: 01/03/2022 Debtor: MF FLAGLER, LLC
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UNSECURED	Claimed:	\$0.00 UNDET
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ESTATE OF ALMA TOBAR C/O WILKES & ASSOCIATES PA 1 N DALE MABRY HWY SUITE 800 TAMPA, FL 33609	Claim Number: 20425 Claim Date: 01/03/2022 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$0.00 UNDET
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ESTATE OF ALVERDA DUNN 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20186 Claim Date: 12/11/2021 Debtor: SF KISSIMMEE, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF ALVERDA DUNN 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20187 Claim Date: 12/11/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF ALVERDA DUNN 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20188 Claim Date: 12/11/2021 Debtor: FLORIDA FACILITIES, LLC
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UNSECURED	Claimed:	\$1,000,000.00
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GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

ESTATE OF ALVERDA DUNN 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20189 Claim Date: 12/11/2021 Debtor: PENSACOLA ADMINISTRATIVE SERVICES, LLC
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UNSECURED	Claimed:	\$1,000,000.00
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ESTATE OF ARLENE THOMPSON, THE WILLIAM THOMPSON, PR C/O COZEN O'CONNOR;THOMAS J FRANCELLA JR 1201 N MARKET ST, STE 1001 WILMINGTON, DE 19801	Claim Number: 203 Claim Date: 12/08/2021 Debtor: MF DEBARY, LLC
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UNSECURED	Claimed:	\$55,000.00
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ESTATE OF BARBARA SUE BIRNIE C/O FENSTER & COHEN PA 111 N PINE ISLAND RD, #210 PLANTATION, FL 33324	Claim Number: 223 Claim Date: 12/13/2021 Debtor: BREVARD OAKS CENTER, LLC
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UNSECURED	Claimed:	\$500,000.00	Scheduled:	\$0.00 UNLIQ
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ESTATE OF BEATRICE JONES BY AND THROUGH THE PERSONAL REP SHAWANNA EVANS C/O KENNETH R SEGAL 1999 UNIVERSITY DR, STE 402 CORAL SPRINGS, FL 33071	Claim Number: 392 Claim Date: 12/29/2021 Debtor: SF ROYAL MANOR, LLC
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UNSECURED	Claimed:	\$300,000.00
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ESTATE OF BETTY LEE JACKSON C/O WILKES & ASSOCIATES PA 1 N DALE MABRY HWY, STE 800 TAMPA, FL 33609	Claim Number: 20389 Claim Date: 12/30/2021 Debtor: FL HUD ROSEWOOD, LLC
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UNSECURED	Claimed:	\$0.00 UNDET
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GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

ESTATE OF BETTY LEE JACKSON C/O WILKES & ASSOCIATES PA 1 N DALE MABRY HWY, STE 800 TAMPA, FL 33609	Claim Number: 20390 Claim Date: 12/30/2021 Debtor: HUD FACILITIES, LLC
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UNSECURED	Claimed:	\$0.00	UNDET
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ESTATE OF BETTY LEE JACKSON C/O WILKES & ASSOCIATES PA 1 N DALE MABRY HWY, STE 800 TAMPA, FL 33609	Claim Number: 20391 Claim Date: 12/30/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$0.00	UNDET
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ESTATE OF BOBBIE JO TORRES RONDA BRINLEE, PR, ET AL C/O IAN D PINKERT, ESQ 150 ALHAMBRA CIR, STE 1100 CORAL GABLES, FL 33134	Claim Number: 373 Claim Date: 12/23/2021 Debtor: SF BREVARD, LLC
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UNSECURED	Claimed:	\$600,000.00	UNLIQ	Scheduled:	\$0.00	UNLIQ
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ESTATE OF BOBBIE JO TORRES AND SURVIVORS RONDA BRINLEE AND DARYL TORRES C/O IAN PINKERT, ESQ 150 ALHAMBRA CIR, STE 1100 CORAL GABLES, FL 33134	Claim Number: 31 Claim Date: 11/04/2021 Debtor: SF BREVARD, LLC
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UNSECURED	Claimed:	\$600,000.00	UNLIQ
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ESTATE OF BRIAN FITZGERALD, THE CHRISTIAN FITZGERALD, PR C/O COZEN O'CONNOR; THOMAS J FRANCELLA JR 1201 N MARKET ST, STE 1001 WILMINGTON, DE 19801	Claim Number: 190 Claim Date: 12/08/2021 Debtor: SF ROYAL MANOR, LLC
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UNSECURED	Claimed:	\$200,000.00
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

ESTATE OF CALVIN LANIER 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20203 Claim Date: 12/11/2021 Debtor: NF RIVER CHASE, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF CALVIN LANIER 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20204 Claim Date: 12/11/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF CALVIN LANIER 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20205 Claim Date: 12/11/2021 Debtor: HUD FACILITIES, LLC
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UNSECURED	Claimed:	\$1,000,000.00
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ESTATE OF CALVIN LANIER 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20206 Claim Date: 12/11/2021 Debtor: GCH MANAGEMENT SERVICES, LLC
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UNSECURED	Claimed:	\$1,000,000.00
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ESTATE OF CARLOS J COLOM COLON, THE DIANE COLOM-GARCIA, PR C/O COZEN O'CONNOR;THOMAS J FRANCELLA JR 1201 N MARKET ST, STE 1001 WILMINGTON, DE 19801	Claim Number: 191 Claim Date: 12/08/2021 Debtor: NF MANOR, LLC
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UNSECURED	Claimed:	\$350,000.00
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GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

ESTATE OF CARLOS LABO C/O FENSTER T COHEN PA 111 N PINE ISLAND RD, #210 PLANTATION, FL 33324	Claim Number: 293 Claim Date: 12/21/2021 Debtor: FL HUD MARGATE, LLC
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UNSECURED	Claimed:	\$30,000.00	Scheduled:	\$20,000.00
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ESTATE OF CARMEN TOLLINCHI C/O BLAIR N MENDES 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20242 Claim Date: 12/11/2021 Debtor: MF LONGWOOD, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF CARMEN TOLLINCHI C/O BLAIR N MENDES 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20243 Claim Date: 12/11/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF CARMEN TOLLINCHI C/O BLAIR N MENDES 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20244 Claim Date: 12/11/2021 Debtor: FLORIDA FACILITIES, LLC
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UNSECURED	Claimed:	\$1,000,000.00
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ESTATE OF CARMEN TOLLINCHI C/O BLAIR N MENDES 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20245 Claim Date: 12/11/2021 Debtor: PENSACOLA ADMINISTRATIVE SERVICES, LLC
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UNSECURED	Claimed:	\$1,000,000.00
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

ESTATE OF CAROLYN TURNER C/O BLAIR N MENDES 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20246 Claim Date: 12/11/2021 Debtor: MF WINTER PARK, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF CAROLYN TURNER C/O BLAIR N MENDES 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20247 Claim Date: 12/11/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF CAROLYN TURNER C/O BLAIR N MENDES 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20248 Claim Date: 12/11/2021 Debtor: FLORIDA FACILITIES, LLC
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UNSECURED	Claimed:	\$1,000,000.00
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ESTATE OF CAROLYN TURNER C/O BLAIR N MENDES 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20249 Claim Date: 12/11/2021 Debtor: PENSACOLA ADMINISTRATIVE SERVICES, LLC
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UNSECURED	Claimed:	\$1,000,000.00
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ESTATE OF DEBORAH DELEEUW 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20180 Claim Date: 12/11/2021 Debtor: SF GLEN OAKS, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF DEBORAH DELEEUW 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20181 Claim Date: 12/11/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF DIANE D BERRY, THE NINA GROSS, PR C/O COZEN O'CONNOR;THOMAS J FRANCELLA JR 1201 N MARKET ST, STE 1001 WILMINGTON, DE 19801	Claim Number: 192 Claim Date: 12/08/2021 Debtor: MF WINTER PARK, LLC
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UNSECURED	Claimed:	\$350,000.00
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ESTATE OF DOMENICA B CASTELLANO C/O WILKES & ASSOCIATES PA ONE N DALE MABRY, STE 800 TAMPA, FL 33609	Claim Number: 20407 Claim Date: 12/31/2021 Debtor: SF TAMPA, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF DOMENICA B CASTELLANO C/O WILKES & ASSOCIATES PA ONE N DALE MABRY, STE 800 TAMPA, FL 33609	Claim Number: 20408 Claim Date: 12/31/2021 Debtor: FLORIDA FACILITIES, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF DOMENICA B CASTELLANO C/O WILKES & ASSOCIATES PA ONE N DALE MABRY, STE 800 TAMPA, FL 33609	Claim Number: 20409 Claim Date: 12/31/2021 Debtor: GCH MANAGEMENT SERVICES, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

ESTATE OF DOMENICA B CASTELLANO C/O WILKES & ASSOCIATES PA ONE N DALE MABRY, STE 800 TAMPA, FL 33609	Claim Number: 20410 Claim Date: 12/31/2021 Debtor: PENSACOLA ADMINISTRATIVE SERVICES, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF DOMENICA B CASTELLANO C/O WILKES & ASSOCIATES PA ONE N DALE MABRY, STE 800 TAMPA, FL 33609	Claim Number: 20411 Claim Date: 12/31/2021 Debtor: PENSACOLA ADMINISTRATIVE HOLDINGS, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF DOMENICA B CASTELLANO C/O WILKES & ASSOCIATES PA ONE N DALE MABRY, STE 800 TAMPA, FL 33609	Claim Number: 20412 Claim Date: 12/31/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF DONALD STEPHENS, THE DONALD STEPHENS III, PR C/O COZEN O'CONNOR;THOMAS J FRANCELLA JR 1201 N MARKET ST, STE 1001 WILMINGTON, DE 19801	Claim Number: 195 Claim Date: 12/08/2021 Debtor: NF WINDSOR, LLC
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UNSECURED	Claimed:	\$20,000.00
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ESTATE OF DOROTHY WEBER C/O BLAIR N MENDES 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20254 Claim Date: 12/11/2021 Debtor: SF BOYNTON, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF DOROTHY WEBER C/O BLAIR N MENDES 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20255 Claim Date: 12/11/2021 Debtor: GULF COAST HEALTH CARE, LLC
UNSECURED	Claimed: \$10,000,000.00
ESTATE OF DOROTHY WEBER C/O BLAIR N MENDES 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20256 Claim Date: 12/11/2021 Debtor: PENSACOLA ADMINISTRATIVE SERVICES, LLC Comments: POSSIBLY AMENDED BY 20258
UNSECURED	Claimed: \$1,000,000.00
ESTATE OF DOROTHY WEBER C/O BLAIR N MENDES 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20257 Claim Date: 12/11/2021 Debtor: FLORIDA FACILITIES, LLC
UNSECURED	Claimed: \$1,000,000.00
ESTATE OF DOROTHY WEBER C/O BLAIR N MENDES 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20258 Claim Date: 12/11/2021 Debtor: PENSACOLA ADMINISTRATIVE SERVICES, LLC Comments: AMENDS CLAIM #20256
UNSECURED	Claimed: \$1,000,000.00
ESTATE OF EARLENE REGISTER C/O MENDES REINS & WILANDER ATTN BLAIR N MENDES 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20215 Claim Date: 12/11/2021 Debtor: MF LONGWOOD, LLC
UNSECURED	Claimed: \$10,000,000.00

GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

ESTATE OF EARLENE REGISTER 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20216 Claim Date: 12/11/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF EDDIE G LEWIS SR HASHA LEWIS, ADMINISTRATRIX, ET AL C/O JEHL LAW GROUP PLLC 5400 POPLAR AVE, STE 250 MEMPHIS, TN 38119	Claim Number: 381 Claim Date: 12/27/2021 Debtor: GCH MANAGEMENT SERVICES, LLC
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UNSECURED	Claimed:	\$500,000.00 UNLIQ	Scheduled:	\$0.00 UNLIQ
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ESTATE OF EDDIE G LEWIS SR HASHA LEWIS, ADMINISTRATRIX, ET AL C/O JEHL LAW GROUP PLLC 5400 POPLAR AVE, STE 250 MEMPHIS, TN 38119	Claim Number: 382 Claim Date: 12/27/2021 Debtor: HUD FACILITIES, LLC
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UNSECURED	Claimed:	\$500,000.00 UNLIQ	Scheduled:	\$0.00 UNLIQ
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ESTATE OF EDDIE G LEWIS SR HASHA LEWIS, ADMINISTRATRIX, ET AL C/O JEHL LAW GROUP PLLC 5400 POPLAR AVE, STE 250 MEMPHIS, TN 38119	Claim Number: 383 Claim Date: 12/27/2021 Debtor: MS SINGING, LLC
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UNSECURED	Claimed:	\$500,000.00 UNLIQ	Scheduled:	\$0.00 UNLIQ
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ESTATE OF EDDIE G LEWIS SR HASHA LEWIS, ADMINISTRATRIX, ET AL C/O JEHL LAW GROUP PLLC 5400 POPLAR AVE, STE 250 MEMPHIS, TN 38119	Claim Number: 384 Claim Date: 12/27/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$500,000.00 UNLIQ	Scheduled:	\$0.00 UNLIQ
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ESTATE OF ERIC WERY C/O BLAIR N MENDES 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20259 Claim Date: 12/11/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF ERIC WERY C/O BLAIR N MENDES 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20260 Claim Date: 12/11/2021 Debtor: SF BREVARD, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF ESTHER DAVIS TORN, THE C/O LAW OFFICES OF CRAIG GOLDENFARB ATTN SPENCER KUVIN, ESQ 1800 S AUSTRALIAN AVE, STE 400 WEST PALM BEACH, FL 33409	Claim Number: 20120 Claim Date: 12/09/2021 Debtor: SF BOYNTON, LLC
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UNSECURED	Claimed:	\$1,000,000.00
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ESTATE OF EVELYN V REYNOLDS, THE KIRK BARRET, PR C/O COZEN O'CONNOR;THOMAS J FRANCELLA JR 1201 N MARKET ST, STE 1001 WILMINGTON, DE 19801	Claim Number: 197 Claim Date: 12/08/2021 Debtor: SF ROYAL MANOR, LLC
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UNSECURED	Claimed:	\$350,000.00
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ESTATE OF FRANCES I EINSTEIN C/O WILKES & ASSOCIATES PA ONE N DALE MABRY, STE 800 TAMPA, FL 33609	Claim Number: 20416 Claim Date: 12/31/2021 Debtor: MF LAKE EUSTIS, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF FRANCES I EINSTEIN C/O WILKES & ASSOCIATES PA ONE N DALE MABRY, STE 800 TAMPA, FL 33609	Claim Number: 20417 Claim Date: 12/31/2021 Debtor: FLORIDA FACILITIES, LLC
UNSECURED	Claimed: \$10,000,000.00
ESTATE OF FRANCES I EINSTEIN C/O WILKES & ASSOCIATES PA ONE N DALE MABRY, STE 800 TAMPA, FL 33609	Claim Number: 20418 Claim Date: 12/31/2021 Debtor: GULF COAST HEALTH CARE, LLC
UNSECURED	Claimed: \$10,000,000.00
ESTATE OF GERALD HARTMAN C/O WILKES & ASSOCIATES PA 1 N DALE MABRY HWY, STE 800 TAMPA, FL 33609	Claim Number: 20147 Claim Date: 12/10/2021 Debtor: MF LAKE EUSTIS, LLC
UNSECURED	Claimed: \$10,000,000.00
ESTATE OF GERALD HARTMAN C/O WILKES & ASSOCIATES PA 1 N DALE MABRY HWY, STE 800 TAMPA, FL 33609	Claim Number: 20148 Claim Date: 12/10/2021 Debtor: FLORIDA FACILITIES, LLC
UNSECURED	Claimed: \$10,000,000.00
ESTATE OF GERALD HARTMAN C/O WILKES & ASSOCIATES PA 1 N DALE MABRY HWY, STE 800 TAMPA, FL 33609	Claim Number: 20149 Claim Date: 12/10/2021 Debtor: GULF COAST HEALTH CARE, LLC
UNSECURED	Claimed: \$10,000,000.00

GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

ESTATE OF GRACE A HALL
C/O WILKES & ASSOCIATES PA
1 N DALE MABRY HWY, STE 800
TAMPA, FL 33609

Claim Number: 20150
Claim Date: 12/10/2021
Debtor: MF HALIFAX, LLC

UNSECURED Claimed: \$10,000,000.00

ESTATE OF GRACE A HALL
C/O WILKES & ASSOCIATES PA
1 N DALE MABRY HWY, STE 800
TAMPA, FL 33609

Claim Number: 20151
Claim Date: 12/10/2021
Debtor: FLORIDA FACILITIES, LLC

UNSECURED Claimed: \$10,000,000.00

ESTATE OF GRACE A HALL
C/O WILKES & ASSOCIATES PA
1 N DALE MABRY HWY, STE 800
TAMPA, FL 33609

Claim Number: 20152
Claim Date: 12/10/2021
Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED Claimed: \$10,000,000.00

ESTATE OF HAZEL STANSEL
C/O BLAIR N MENDES
4401 W KENNEDY BLVD, STE 250
TAMPA, FL 33609

Claim Number: 20237
Claim Date: 12/11/2021
Debtor: NF SUWANNEE, LLC

UNSECURED Claimed: \$10,000,000.00

ESTATE OF HAZEL STANSEL
C/O BLAIR N MENDES
4401 W KENNEDY BLVD, STE 250
TAMPA, FL 33609

Claim Number: 20238
Claim Date: 12/11/2021
Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED Claimed: \$10,000,000.00

GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

ESTATE OF HAZEL STANSEL C/O BLAIR N MENDES 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20239 Claim Date: 12/11/2021 Debtor: GCH MANAGEMENT SERVICES, LLC
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UNSECURED	Claimed:	\$1,000,000.00
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ESTATE OF HAZEL STANSEL 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20240 Claim Date: 12/11/2021 Debtor: HUD FACILITIES, LLC
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UNSECURED	Claimed:	\$1,000,000.00
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ESTATE OF HAZEL STANSEL 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20241 Claim Date: 12/11/2021 Debtor: HUD FACILITIES, LLC
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UNSECURED	Claimed:	\$1,000,000.00
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ESTATE OF HELEN ANN ALDRIDGE [MORE] ESTATE OF HELEN ANN ALDRIDGE 5400 POPLAR AVE SUITE 250 MEMPHIS, TN 38119	Claim Number: 401 Claim Date: 01/03/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$500,000.00
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ESTATE OF HELEN ANN ALDRIDGE, DE [MORE] 5400 POPLAR AVENUE SUITE 250 MEMPHIS, TN 38119	Claim Number: 398 Claim Date: 01/03/2022 Debtor: MS SHELBY, LLC
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UNSECURED	Claimed:	\$500,000.00
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

ESTATE OF HELEN ANN ALDRIDGE, [MORE]
 5400 POPLAR AVE
 SUITE 250
 MEMPHIS, TN 38119

Claim Number: 399
 Claim Date: 01/03/2021
 Debtor: HUD FACILITIES, LLC

UNSECURED Claimed: \$500,000.00

ESTATE OF HELEN ANN ALDRIDGE, [MORE]
 5400 POPLAR AVE
 SUITE 250
 MEMPHIS, TN 38119

Claim Number: 400
 Claim Date: 01/03/2021
 Debtor: GCH MANAGEMENT SERVICES, LLC

UNSECURED Claimed: \$500,000.00

ESTATE OF HELEN BIEGALSKI BY AND THROUGH
 THE PERSONAL REPRESENTATIVE HELEN BAXTER
 C/O KENNETH R SEGAL
 1999 UNIVERSITY DR, #402
 CORAL SPRINGS, FL 33071

Claim Number: 393
 Claim Date: 12/29/2021
 Debtor: FL HUD MARGATE, LLC

UNSECURED Claimed: \$500,000.00

ESTATE OF HENRY NORMAN
 4401 W KENNEDY BLVD, STE 250
 TAMPA, FL 33609

Claim Number: 20212
 Claim Date: 12/11/2021
 Debtor: FL HUD ROSEWOOD, LLC

UNSECURED Claimed: \$10,000,000.00

ESTATE OF HENRY NORMAN
 4401 W KENNEDY BLVD, STE 250
 TAMPA, FL 33609

Claim Number: 20213
 Claim Date: 12/11/2021
 Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED Claimed: \$10,000,000.00

GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

ESTATE OF HENRY NORMAN 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20214 Claim Date: 12/11/2021 Debtor: HUD FACILITIES, LLC
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UNSECURED	Claimed: \$1,000,000.00
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ESTATE OF HERBERT BEHREND 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20165 Claim Date: 12/11/2021 Debtor: FL HUD ROSEWOOD, LLC
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UNSECURED	Claimed: \$10,000,000.00
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ESTATE OF HERBERT BEHREND 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20166 Claim Date: 12/11/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed: \$10,000,000.00
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ESTATE OF HERBERT BEHREND 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20167 Claim Date: 12/11/2021 Debtor: HUD FACILITIES, LLC
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UNSECURED	Claimed: \$1,000,000.00
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ESTATE OF HUBERT PEARSON, THE KATHY GRIMSLEY, PR C/O COZEN O'CONNOR;THOMAS J FRANCELLA JR 1201 N MARKET ST, STE 1001 WILMINGTON, DE 19801	Claim Number: 198 Claim Date: 12/08/2021 Debtor: SF OAKBROOK, LLC
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UNSECURED	Claimed: \$350,000.00
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GULF COAST HEALTH CARE, LLC
Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

ESTATE OF JAMES DIAL PO BOX 4160 MONTGOMERY, AL 36104	Claim Number: 20027 Claim Date: 11/17/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$1,000,000.00
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ESTATE OF JAMES E KELLY II C/O WILKES & ASSOCIATES PA ONE N DALE MABRY, STE 800 TAMPA, FL 33609	Claim Number: 20137 Claim Date: 12/10/2021 Debtor: MF HERITAGE, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF JAMES E KELLY II C/O WILKES & ASSOCIATES PA ONE N DALE MABRY, STE 800 TAMPA, FL 33609	Claim Number: 20138 Claim Date: 12/10/2021 Debtor: FLORIDA FACILITIES, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF JAMES E KELLY II C/O WILKES & ASSOCIATES PA ONE N DALE MABRY, STE 800 TAMPA, FL 33609	Claim Number: 20139 Claim Date: 12/10/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF JAMES E KELLY II C/O WILKES & ASSOCIATES PA ONE N DALE MABRY, STE 800 TAMPA, FL 33609	Claim Number: 20140 Claim Date: 12/10/2021 Debtor: PENSACOLA ADMINISTRATIVE SERVICES, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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GULF COAST HEALTH CARE, LLC
Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

ESTATE OF JAMES MOORE 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20210 Claim Date: 12/11/2021 Debtor: SF SALERNO, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF JAMES MOORE 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20211 Claim Date: 12/11/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF JAMES T JOHNSON 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20200 Claim Date: 12/11/2021 Debtor: FL HUD BAYSIDE, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF JAMES T JOHNSON 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20201 Claim Date: 12/11/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF JAMES T JOHNSON 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20202 Claim Date: 12/11/2021 Debtor: PENSACOLA ADMINISTRATIVE SERVICES, LLC
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UNSECURED	Claimed:	\$1,000,000.00
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GULF COAST HEALTH CARE, LLC
Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

ESTATE OF JUDITH RISNER C/O BLAIR N MENDES 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20217 Claim Date: 12/11/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF JUDITH RISNER C/O BLAIR N MENDES 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20218 Claim Date: 12/11/2021 Debtor: SF BREVARD, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF KATHY L WRIGHT, THE RICHARD WRIGHT, PR C/O COZEN O'CONNOR;THOMAS J FRANCELLA JR 1201 N MARKET ST, STE 1001 WILMINGTON, DE 19801	Claim Number: 204 Claim Date: 12/08/2021 Debtor: MF WINTER PARK, LLC
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UNSECURED	Claimed:	\$350,000.00
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ESTATE OF KENNETH BARROW 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20160 Claim Date: 12/11/2021 Debtor: FL HUD BAYBREEZE, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF KENNETH BARROW 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20161 Claim Date: 12/11/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF KENNETH BARROW 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609		Claim Number: 20162 Claim Date: 12/11/2021 Debtor: HUD FACILITIES, LLC		
UNSECURED	Claimed:	\$1,000,000.00		
ESTATE OF KENNETH BARROW 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609		Claim Number: 20163 Claim Date: 12/11/2021 Debtor: GCH MANAGEMENT SERVICES, LLC		
UNSECURED	Claimed:	\$1,000,000.00		
ESTATE OF KENNETH BARROW 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609		Claim Number: 20164 Claim Date: 12/11/2021 Debtor: PENSACOLA ADMINISTRATIVE SERVICES, LLC		
UNSECURED	Claimed:	\$1,000,000.00		
ESTATE OF LEO WILLIAMS, THE C/O ANTHONY & PARTNERS LLC 100 S ASHLEY DR, STE 1600 TAMPA, FL 33602		Claim Number: 20015 Claim Date: 11/15/2021 Debtor: GULF COAST HEALTH CARE, LLC		
UNSECURED	Claimed:	\$550,000.00		
ESTATE OF LEOLA WASHINGTON BY AND THROUGH THE ADMINISTRATOR JIMMIE RICHARD C/O BOONE LAW FIRM PA 401 W SUNFLOWER RD CLEVELAND, MS 38732		Claim Number: 386 Claim Date: 12/27/2021 Debtor: MS SHELBY, LLC		
UNSECURED	Claimed:	\$500,000.00	Scheduled:	\$0.00 UNLIQ

GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

ESTATE OF LOUIS COLLINS KAY WILHELM, PR C/O JORDAN RAPPAPORT, ESQ 1300 N FEDERAL HWY, STE 203 BOCA RATON, FL 33432	Claim Number: 20073 Claim Date: 11/30/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed: \$51,500.00
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ESTATE OF LOUISE BRANOM C/O WILKES & ASSOCIATES PA 1 N DALE MABRY HWY, STE 800 TAMPA, FL 33609	Claim Number: 20156 Claim Date: 12/10/2021 Debtor: NF RIVER CHASE, LLC
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UNSECURED	Claimed: \$10,000,000.00
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ESTATE OF LOUISE BRANOM C/O WILKES & ASSOCIATES PA 1 N DALE MABRY HWY, STE 800 TAMPA, FL 33609	Claim Number: 20157 Claim Date: 12/10/2021 Debtor: HUD FACILITIES, LLC
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UNSECURED	Claimed: \$10,000,000.00
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ESTATE OF LOUISE BRANOM C/O WILKES & ASSOCIATES PA 1 N DALE MABRY HWY, STE 800 TAMPA, FL 33609	Claim Number: 20158 Claim Date: 12/10/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed: \$10,000,000.00
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ESTATE OF M THOMAS SHIRLEY M RAYBON, PR C/O MARJORIE LEVINE, ESQ 1601 BELVEDERE RD, STE 500-S WEST PALM BEACH, FL 33406	Claim Number: 20396 Claim Date: 12/30/2021 Debtor: FL HUD PENSACOLA, LLC
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UNSECURED	Claimed: \$1,600,000.00 UNLIQ
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GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

ESTATE OF MARIA RAYMOND, THE VERONICA JOSEPH, PR C/O COZEN O'CONNOR;THOMAS J FRANCELLA JR 1201 N MARKET ST, STE 1001 WILMINGTON, DE 19801	Claim Number: 185 Claim Date: 12/08/2021 Debtor: SF BOYNTON, LLC
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UNSECURED	Claimed:	\$500,000.00
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ESTATE OF MARIE RAYMOND, THE VERONICA JOSEPH, PR C/O COZEN O'CONNOR;THOMAS J FRANCELLA JR 1201 N MARKET ST, STE 1001 WILMINGTON, DE 19801	Claim Number: 184 Claim Date: 12/08/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$500,000.00
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ESTATE OF MARY JANE JOHNSON C/O FENSTER & COHEN PA 111 N PINE ISLAND RD, #210 PLANTATION, FL 33324	Claim Number: 280 Claim Date: 12/17/2021 Debtor: MF FLAGLER, LLC
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UNSECURED	Claimed:	\$200,000.00	Scheduled:	\$0.00 UNLIQ
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ESTATE OF MARY LEE DOUGLAS, THE RONALD ALLEN DOUGLAS, PR C/O COZEN O'CONNOR;THOMAS J FRANCELLA JR 1201 N MARKET ST, STE 1001 WILMINGTON, DE 19801	Claim Number: 200 Claim Date: 12/08/2021 Debtor: NF WINDSOR, LLC
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UNSECURED	Claimed:	\$350,000.00
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ESTATE OF MICHAEL GORDON 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20194 Claim Date: 12/11/2021 Debtor: NF WINDSOR, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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GULF COAST HEALTH CARE, LLC
Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

ESTATE OF MICHAEL GORDON 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20195 Claim Date: 12/11/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF MICHAEL GORDON 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20196 Claim Date: 12/11/2021 Debtor: HUD FACILITIES, LLC
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UNSECURED	Claimed:	\$1,000,000.00
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ESTATE OF MICHAEL GORDON 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20197 Claim Date: 12/11/2021 Debtor: PENSACOLA ADMINISTRATIVE SERVICES, LLC
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UNSECURED	Claimed:	\$1,000,000.00
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ESTATE OF OLLIE ROBINSON C/O BLAIR N MENDES 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20219 Claim Date: 12/11/2021 Debtor: FL HUD PENSACOLA, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF OLLIE ROBINSON C/O BLAIR N MENDES 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20220 Claim Date: 12/11/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF OLLIE ROBINSON
4401 W KENNEDY BLVD, STE 250
TAMPA, FL 33609

Claim Number: 20221
Claim Date: 12/11/2021
Debtor: HUD FACILITIES, LLC

UNSECURED Claimed: \$1,000,000.00

ESTATE OF OLLIE ROBINSON
C/O BLAIR N MENDES
4401 W KENNEDY BLVD, STE 250
TAMPA, FL 33609

Claim Number: 20222
Claim Date: 12/11/2021
Debtor: GCH MANAGEMENT SERVICES, LLC

UNSECURED Claimed: \$1,000,000.00

ESTATE OF OLLIE ROBINSON
C/O BLAIR N MENDES
4401 W KENNEDY BLVD, STE 250
TAMPA, FL 33609

Claim Number: 20223
Claim Date: 12/11/2021
Debtor: PENSACOLA ADMINISTRATIVE SERVICES, LLC

UNSECURED Claimed: \$1,000,000.00

ESTATE OF OUIDA GIBSON, THE
CAMETRA GIBSON-BRYANT, PR
C/O COZEN O'CONNOR;THOMAS J FRANCELLA JR
1201 N MARKET ST, STE 1001
WILMINGTON, DE 19801

Claim Number: 202
Claim Date: 12/08/2021
Debtor: NF RIVER CHASE, LLC

UNSECURED Claimed: \$75,000.00

ESTATE OF PATRICIA MILLER
4401 W KENNEDY BLVD, STE 250
TAMPA, FL 33609

Claim Number: 20207
Claim Date: 12/11/2021
Debtor: NF MANOR, LLC

UNSECURED Claimed: \$10,000,000.00

GULF COAST HEALTH CARE, LLC
Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

ESTATE OF PATRICIA MILLER 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20208 Claim Date: 12/11/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF PATRICIA MILLER 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20209 Claim Date: 12/11/2021 Debtor: HUD FACILITIES, LLC
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UNSECURED	Claimed:	\$1,000,000.00
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ESTATE OF PAUL ESKEW 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20190 Claim Date: 12/11/2021 Debtor: SF LAKE PLACID, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF PAUL ESKEW 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20191 Claim Date: 12/11/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF PAUL ESKEW 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20192 Claim Date: 12/11/2021 Debtor: FLORIDA FACILITIES, LLC
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UNSECURED	Claimed:	\$1,000,000.00
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GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

ESTATE OF PAUL ESKEW 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20193 Claim Date: 12/11/2021 Debtor: GCH MANAGEMENT SERVICES, LLC
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UNSECURED	Claimed:	\$1,000,000.00
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ESTATE OF PENOLA COFFEY BY AND THROUGH ADMINISTRATOR DONALD COFFEY C/O BOONE LAW FIRM PA 401 W SUNFLOWER RD CLEVELAND, MS 38732	Claim Number: 385 Claim Date: 12/27/2021 Debtor: MS SHELBY, LLC
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UNSECURED	Claimed:	\$500,000.00	Scheduled:	\$0.00 UNLIQ
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ESTATE OF RUTH ROBINSON & BENEFICIARIES OF DAMAGES UNDER SECTION 768.21 FL STAT C/O SHEVIN LAW FIRM 7777 GLADES RD, STE 212 BOCA RATON, FL 33434	Claim Number: 49 Claim Date: 11/08/2021 Debtor: SF LAKE PLACID, LLC
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UNSECURED	Claimed:	\$0.00 UNLIQ
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ESTATE OF SADIE MAE MORRIS C/O WILKES & ASSOCIATES PA ONE N DALE MABRY, STE 800 TAMPA, FL 33609	Claim Number: 20132 Claim Date: 12/10/2021 Debtor: SF LAKE PLACID, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF SADIE MAE MORRIS C/O WILKES & ASSOCIATES PA ONE N DALE MABRY, STE 800 TAMPA, FL 33609	Claim Number: 20133 Claim Date: 12/10/2021 Debtor: FLORIDA FACILITIES, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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GULF COAST HEALTH CARE, LLC
Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

ESTATE OF SADIE MAE MORRIS C/O WILKES & ASSOCIATES PA ONE N DALE MABRY, STE 800 TAMPA, FL 33609	Claim Number: 20134 Claim Date: 12/10/2021 Debtor: PENSACOLA ADMINISTRATIVE SERVICES, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF SADIE MAE MORRIS C/O WILKES & ASSOCIATES PA ONE N DALE MABRY, STE 800 TAMPA, FL 33609	Claim Number: 20135 Claim Date: 12/10/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF SADIE MAE MORRIS C/O WILKES & ASSOCIATES PA ONE N DALE MABRY, STE 800 TAMPA, FL 33609	Claim Number: 20136 Claim Date: 12/10/2021 Debtor: GCH MANAGEMENT SERVICES, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF SANDRA SANTIAGO C/O BLAIR N MENDES 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20224 Claim Date: 12/11/2021 Debtor: FL HUD MARGATE, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF SANDRA SANTIAGO C/O BLAIR N MENDES 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20225 Claim Date: 12/11/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

ESTATE OF SANDRA SANTIAGO C/O BLAIR N MENDES 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20226 Claim Date: 12/11/2021 Debtor: HUD FACILITIES, LLC
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UNSECURED	Claimed: \$1,000,000.00
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ESTATE OF SANDRA SANTIAGO C/O BLAIR N MENDES 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20227 Claim Date: 12/11/2021 Debtor: PENSACOLA ADMINISTRATIVE SERVICES, LLC
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UNSECURED	Claimed: \$1,000,000.00
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ESTATE OF SHELLEY A TAMBLING C/O WILKES & ASSOCIATES PA ONE N DALE MABRY, STE 800 TAMPA, FL 33609	Claim Number: 20413 Claim Date: 12/31/2021 Debtor: FLORIDA FACILITIES, LLC
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UNSECURED	Claimed: \$10,000,000.00
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ESTATE OF SHELLEY A TAMBLING C/O WILKES & ASSOCIATES PA ONE N DALE MABRY, STE 800 TAMPA, FL 33609	Claim Number: 20414 Claim Date: 12/31/2021 Debtor: MF LAKE EUSTIS, LLC
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UNSECURED	Claimed: \$10,000,000.00
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ESTATE OF SHELLEY A TAMBLING C/O WILKES & ASSOCIATES PA ONE N DALE MABRY, STE 800 TAMPA, FL 33609	Claim Number: 20415 Claim Date: 12/31/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed: \$10,000,000.00
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GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

ESTATE OF STEPHEN BROWN MCCOWN C/O WILKES & ASSOCIATES PA 1 N DALE MABRY HWY, STE 800 TAMPA, FL 33609	Claim Number: 20144 Claim Date: 12/10/2021 Debtor: FL HUD SILVERCREST, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF STEPHEN BROWN MCCOWN C/O WILKES & ASSOCIATES PA 1 N DALE MABRY HWY, STE 800 TAMPA, FL 33609	Claim Number: 20145 Claim Date: 12/10/2021 Debtor: HUD FACILITIES, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF STEPHEN BROWN MCCOWN C/O WILKES & ASSOCIATES PA 1 N DALE MABRY HWY, STE 800 TAMPA, FL 33609	Claim Number: 20146 Claim Date: 12/10/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF SUE HUGHLETT C/O KOHN LAW PA ATTN KIMBERLEY M KOHN 3004 W CYPRESS ST TAMPA, FL 33609	Claim Number: 133 Claim Date: 11/29/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$300,000.00
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ESTATE OF SUE HUGHLETT C/O KOHN LAW PA ATTN KIMBERLEY M KOHN 3004 W CYPRESS ST TAMPA, FL 33609	Claim Number: 135 Claim Date: 11/29/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$300,000.00
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

ESTATE OF VIOLA MAY DAY, THE CINDY WOPERT, PR C/O COZEN O'CONNOR;THOMAS J FRANCELLA JR 1201 N MARKET ST, STE 1001 WILMINGTON, DE 19801	Claim Number: 188 Claim Date: 12/08/2021 Debtor: FL HUD BAYBREEZE, LLC
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UNSECURED	Claimed:	\$500,000.00
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ESTATE OF VIOLA MAY DAY, THE CINDY WOPERT, PR C/O COZEN O'CONNOR;THOMAS J FRANCELLA JR 1201 N MARKET ST, STE 1001 WILMINGTON, DE 19801	Claim Number: 189 Claim Date: 12/08/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$500,000.00
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ESTATE OF VIOLET TRUCKENBRODT C/O EDWARD TRUCKENRBODT, PR 919 N MARKET ST, STE 1410 WILMINGTON, DE 19801-3046	Claim Number: 20017 Claim Date: 11/15/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$165,000.00
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ESTATE OF WANDA F BOOTH C/O WILKES & ASSOCIATES PA 1 N DALE MABRY HWY, STE 800 TAMPA, FL 33609	Claim Number: 20153 Claim Date: 12/10/2021 Debtor: MF OAKWOOD, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF WANDA F BOOTH C/O WILKES & ASSOCIATES PA 1 N DALE MABRY HWY, STE 800 TAMPA, FL 33609	Claim Number: 20154 Claim Date: 12/10/2021 Debtor: FLORIDA FACILITIES, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

ESTATE OF WANDA F BOOTH C/O WILKES & ASSOCIATES PA 1 N DALE MABRY HWY, STE 800 TAMPA, FL 33609	Claim Number: 20155 Claim Date: 12/10/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF WILLIAM ALBECK, THE C/O LAW OFFICES OF CRAIG GOLDENFARB ATTN SPENCER KUVIN, ESQ 1800 S AUSTRALIAN AVE, STE 400 WEST PALM BEACH, FL 33409	Claim Number: 20121 Claim Date: 12/09/2021 Debtor: SF BOYNTON, LLC
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UNSECURED	Claimed:	\$1,000,000.00 UNLIQ
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ESTATE OF WILLIAM DEWITT ROBERSON JR C/O WILKES & ASSOCIATES PA 1 N DALE MABRY HWY, STE 800 TAMPA, FL 33609	Claim Number: 20141 Claim Date: 12/10/2021 Debtor: SF BREVARD, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF WILLIAM DEWITT ROBERSON JR C/O WILKES & ASSOCIATES PA 1 N DALE MABRY HWY, STE 800 TAMPA, FL 33609	Claim Number: 20142 Claim Date: 12/10/2021 Debtor: FLORIDA FACILITIES, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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ESTATE OF WILLIAM DEWITT ROBERSON JR C/O WILKES & ASSOCIATES PA 1 N DALE MABRY HWY, STE 800 TAMPA, FL 33609	Claim Number: 20143 Claim Date: 12/10/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

EXCELLENCE OF DIETETIC SERVICES INC D/B/A BSN SOLUTIONS ATTN DIANE HALL 3780 LAURENS AVE MALABAR, FL 32950	Claim Number: 88 Claim Date: 11/16/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$1,829.57
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FAMILY PODIATRY 500 NW 43RD ST, STE 2 GAINESVILLE, FL 32607	Claim Number: 219 Claim Date: 12/13/2021 Debtor: NF SUWANNEE, LLC
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UNSECURED	Claimed:	\$39,750.00	Scheduled:	\$33,125.00
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FEDEX CORPORATE SERVICES, INC. 3965 AIRWAYS BLVD, MODULE G, 3RD FLOOR MEMPHIS, TN 38116-5017	Claim Number: 20427 Claim Date: 01/03/2022 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$60,315.04
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FLADE SERVICES LLC 1260 HAMPTON BLVD, #621 NORTH LAUDERDALE, FL 33068	Claim Number: 61 Claim Date: 11/09/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$7,030.00
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FLADE SERVICES, LLC 1260 HAMPTON BLVD #621 NORTH LAUDERDALE, FL 33068	Claim Number: 20423 Claim Date: 01/01/2022 Debtor: FL HUD MARGATE, LLC
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UNSECURED	Claimed:	\$7,030.00
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

FLANDERS, MALISHA
505 N MILLS AVE
ORLANDO, FL 32803

Claim Number: 20361
Claim Date: 12/27/2021
Debtor: MF LAKE EUSTIS, LLC

UNSECURED Claimed: \$650,000.00

FLORIDA HEALTH CARE ASSOCIATION
C/O BERGER SINGERMANN LLP
ATTN MICHAEL J NILES, ESQ
313 N MONROE ST, STE 301
MIAMI, FL 32301

Claim Number: 160
Claim Date: 12/08/2021
Debtor: BREVARD OAKS CENTER, LLC

UNSECURED Claimed: \$6,309.39 Scheduled: \$6,309.42

FLORIDA HEALTH CARE ASSOCIATION
C/O BERGER SINGERMANN LLP
ATTN MICHAEL J NILES, ESQ
313 N MONROE ST, STE 301
MIAMI, FL 32301

Claim Number: 161
Claim Date: 12/08/2021
Debtor: FL HUD BAYBREEZE, LLC

UNSECURED Claimed: \$5,787.99 Scheduled: \$5,788.02

FLORIDA HEALTH CARE ASSOCIATION
C/O BERGER SINGERMANN LLP
ATTN MICHAEL J NILES, ESQ
313 N MONROE ST, STE 301
MIAMI, FL 32301

Claim Number: 162
Claim Date: 12/08/2021
Debtor: FL HUD BAYSIDE, LLC

UNSECURED Claimed: \$5,787.99 Scheduled: \$5,788.02

FLORIDA HEALTH CARE ASSOCIATION
C/O BERGER SINGERMANN LLP
ATTN MICHAEL J NILES, ESQ
313 N MONROE ST, STE 301
MIAMI, FL 32301

Claim Number: 163
Claim Date: 12/08/2021
Debtor: FL HUD DESTIN, LLC

UNSECURED Claimed: \$4,697.79 Scheduled: \$4,697.82

GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

FLORIDA HEALTH CARE ASSOCIATION
C/O BERGER SINGERMANN LLP
ATTN MICHAEL J NILES, ESQ
313 N MONROE ST, STE 301
MIAMI, FL 32301

Claim Number: 164
Claim Date: 12/08/2021
Debtor: FL HUD MARGATE, LLC

UNSECURED	Claimed:	\$8,174.68	Scheduled:	\$8,174.64
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FLORIDA HEALTH CARE ASSOCIATION
C/O BERGER SINGERMANN LLP
ATTN MICHAEL J NILES, ESQ
313 N MONROE ST, STE 301
MIAMI, FL 32301

Claim Number: 165
Claim Date: 12/08/2021
Debtor: FL HUD PENSACOLA, LLC

UNSECURED	Claimed:	\$5,787.99	Scheduled:	\$5,788.02
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FLORIDA HEALTH CARE ASSOCIATION
C/O BERGER SINGERMANN LLP
ATTN MICHAEL J NILES, ESQ
313 N MONROE ST, STE 301
MIAMI, FL 32301

Claim Number: 166
Claim Date: 12/08/2021
Debtor: FL HUD ROSEWOOD, LLC

UNSECURED	Claimed:	\$7,446.99	Scheduled:	\$7,446.96
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FLORIDA HEALTH CARE ASSOCIATION
C/O BERGER SINGERMANN LLP
ATTN MICHAEL J NILES, ESQ
313 N MONROE ST, STE 301
MIAMI, FL 32301

Claim Number: 167
Claim Date: 12/08/2021
Debtor: FL HUD SILVERCREST, LLC

UNSECURED	Claimed:	\$2,943.99	Scheduled:	\$2,944.02
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FLORIDA HEALTH CARE ASSOCIATION
C/O BERGER SINGERMANN LLP
ATTN MICHAEL J NILES, ESQ
313 N MONROE ST, STE 301
MIAMI, FL 32301

Claim Number: 168
Claim Date: 12/08/2021
Debtor: MF LAKE EUSTIS, LLC

UNSECURED	Claimed:	\$4,332.67	Scheduled:	\$4,332.66
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

FLORIDA HEALTH CARE ASSOCIATION
C/O BERGER SINGERMANN LLP
ATTN MICHAEL J NILES, ESQ
313 N MONROE ST, STE 301
MIAMI, FL 32301

Claim Number: 169
Claim Date: 12/08/2021
Debtor: MF WINTER PARK, LLC

UNSECURED	Claimed:	\$8,598.67	Scheduled:	\$8,598.66
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FLORIDA HEALTH CARE ASSOCIATION
C/O BERGER SINGERMANN LLP
ATTN MICHAEL J NILES, ESQ
313 N MONROE ST, STE 301
MIAMI, FL 32301

Claim Number: 170
Claim Date: 12/08/2021
Debtor: NF CHIPOLA, LLC

UNSECURED	Claimed:	\$2,910.67	Scheduled:	\$2,910.66
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FLORIDA HEALTH CARE ASSOCIATION
C/O BERGER SINGERMANN LLP
ATTN MICHAEL J NILES, ESQ
313 N MONROE ST, STE 301
MIAMI, FL 32301

Claim Number: 171
Claim Date: 12/08/2021
Debtor: NF ESCAMBIA, LLC

UNSECURED	Claimed:	\$4,365.99	Scheduled:	\$4,366.02
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FLORIDA HEALTH CARE ASSOCIATION
C/O BERGER SINGERMANN LLP
ATTN MICHAEL J NILES, ESQ
313 N MONROE ST, STE 301
MIAMI, FL 32301

Claim Number: 172
Claim Date: 12/08/2021
Debtor: NF NINE MILE, LLC

UNSECURED	Claimed:	\$4,365.99	Scheduled:	\$4,366.02
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FLORIDA HEALTH CARE ASSOCIATION
C/O BERGER SINGERMANN LLP
ATTN MICHAEL J NILES, ESQ
313 N MONROE ST, STE 301
MIAMI, FL 32301

Claim Number: 173
Claim Date: 12/08/2021
Debtor: NF PENSACOLA MANOR, LLC

UNSECURED	Claimed:	\$7,209.99	Scheduled:	\$7,210.02
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

FLORIDA HEALTH CARE ASSOCIATION
C/O BERGER SINGERMANN LLP
ATTN MICHAEL J NILES, ESQ
313 N MONROE ST, STE 301
MIAMI, FL 32301

Claim Number: 174
Claim Date: 12/08/2021
Debtor: NF SUWANNEE, LLC

UNSECURED	Claimed:	\$8,598.67	Scheduled:	\$8,598.66
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FLORIDA HEALTH CARE ASSOCIATION
C/O BERGER SINGERMANN LLP
ATTN MICHAEL J NILES, ESQ
313 N MONROE ST, STE 301
MIAMI, FL 32301

Claim Number: 175
Claim Date: 12/08/2021
Debtor: SF BREVARD, LLC

UNSECURED	Claimed:	\$5,422.87	Scheduled:	\$5,422.86
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FLORIDA HEALTH CARE ASSOCIATION
C/O BERGER SINGERMANN LLP
ATTN MICHAEL J NILES, ESQ
313 N MONROE ST, STE 301
MIAMI, FL 32301

Claim Number: 176
Claim Date: 12/08/2021
Debtor: SF CARNEGIE, LLC

UNSECURED	Claimed:	\$6,641.19	Scheduled:	\$6,641.19
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FLORIDA HEALTH CARE ASSOCIATION
C/O BERGER SINGERMANN LLP
ATTN MICHAEL J NILES, ESQ
313 N MONROE ST, STE 301
MIAMI, FL 32301

Claim Number: 177
Claim Date: 12/08/2021
Debtor: SF LAKE PLACID ALF, LLC

UNSECURED	Claimed:	\$1,473.67	Scheduled:	\$1,473.66
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FLORIDA MEDICAL TRANSPORT INC
941 W MORSE BLVD, STE #100
WINTER PARK, FL 32789

Claim Number: 73
Claim Date: 11/12/2021
Debtor: GULF COAST HEALTH CARE, LLC

PRIORITY	Claimed:	\$22,172.00
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

FLORIDA POWER & LIGHT
ATTN RRD/LFO BKY
4200 W FLAGLER ST
CORAL GABLES, FL 33134

Claim Number: 11
Claim Date: 10/21/2021
Debtor: MF FLAGLER, LLC

UNSECURED Claimed: \$3,687.31

FLORIDA POWER & LIGHT
ATTN RRD/LFO BKY
4200 W FLAGLER ST
CORAL GABLES, FL 33134

Claim Number: 12
Claim Date: 10/21/2021
Debtor: MF HALIFAX, LLC

UNSECURED Claimed: \$2,225.23

FLORIDA POWER & LIGHT
ATTN RRD/LFO BKY
4200 W FLAGLER ST
CORAL GABLES, FL 33134

Claim Number: 13
Claim Date: 10/21/2021
Debtor: NF MANOR, LLC

UNSECURED Claimed: \$2,613.11

FLORIDA POWER & LIGHT
ATTN RRD/LFO BKY
4200 W FLAGLER ST
CORAL GABLES, FL 33134

Claim Number: 14
Claim Date: 10/21/2021
Debtor: NF SUWANNEE, LLC

UNSECURED Claimed: \$14,872.28

FLORIDA POWER & LIGHT
ATTN RRD/LFO BKY
4200 W FLAGLER ST
CORAL GABLES, FL 33134

Claim Number: 16
Claim Date: 10/21/2021
Debtor: SF CARNEGIE, LLC

UNSECURED Claimed: \$3,913.48

GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

FLORIDA POWER & LIGHT
ATTN RRD/LFO/BKY
4200 W FLAGLER ST
CORAL GABLES, FL 33134

Claim Number: 37
Claim Date: 11/05/2021
Debtor: SF CARNEGIE, LLC

UNSECURED Claimed: \$3,913.48

FLORIDA POWER & LIGHT
ATTN RRD/LFO/BKY
4200 W FLAGLER ST
CORAL GABLES, FL 33134

Claim Number: 38
Claim Date: 11/05/2021
Debtor: MF HALIFAX, LLC

UNSECURED Claimed: \$2,225.23

FLORIDA POWER & LIGHT
ATTN RRD/LFO/BKY
4200 W FLAGLER ST
CORAL GABLES, FL 33134

Claim Number: 39
Claim Date: 11/05/2021
Debtor: MF FLAGLER, LLC

UNSECURED Claimed: \$3,687.31

FLORIDA POWER & LIGHT
ATTN RRD/LFO/BKY
4200 W FLAGLER ST
CORAL GABLES, FL 33134

Claim Number: 40
Claim Date: 11/05/2021
Debtor: NF MANOR, LLC

UNSECURED Claimed: \$2,613.11

FLORIDA POWER & LIGHT
ATTN RRD/LFO/BKY
4200 W FLAGLER ST
CORAL GABLES, FL 33134

Claim Number: 41
Claim Date: 11/05/2021
Debtor: NF SUWANNEE, LLC

UNSECURED Claimed: \$14,872.28

GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

FOOTE-JOHNSON, CAROLINE C/O BRADLEY S ODOM, ESQ 1800 N E ST PENSACOLA, FL 32501	Claim Number: 281 Claim Date: 12/20/2021 Debtor: FL HUD BAYSIDE, LLC
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UNSECURED	Claimed:	\$90,000.00	Scheduled:	\$90,000.00
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FRANSON, ISELEY & ASSOCIATES, P.A. 1400 PRUDENTIAL DRIVE, SUITE 5 JACKSONVILLE, FL 32207	Claim Number: 20428 Claim Date: 01/03/2022 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$10,802.16
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FREEMAN, JOHN 90 ORANGE BLOSSOM AVE DEFUNIAK SPRINGS, FL 32433	Claim Number: 20359 Claim Date: 12/26/2021 Debtor: GULF COAST HEALTH CARE, LLC
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PRIORITY	Claimed:	\$100,000.00
SECURED	Claimed:	\$100,000.00
UNSECURED	Claimed:	\$100,000.00

FRONT LINE TRANSPORT EMERALD COAST LLC PO BOX 415 VALPARAISO, FL 32580	Claim Number: 20375 Claim Date: 12/28/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$302.28
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GENERAL PARTS LLC PO BOX 9201 MI 10 MINNEAPOLIS, MN 55480-9201	Claim Number: 390 Claim Date: 12/29/2021 Debtor: NF PENSACOLA MANOR, LLC
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UNSECURED	Claimed:	\$213.90	Scheduled:	\$213.90
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GORGAL, CARMEN C/O GEORGE CASTILLO, PR 919 N MARKET ST, STE 1410 WILMINGTON, DE 19801-3046		Claim Number: 20024 Claim Date: 11/16/2021 Debtor: GULF COAST HEALTH CARE, LLC	
UNSECURED	Claimed:	\$75,000.00	
GRAMLING, JOHN 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609		Claim Number: 20198 Claim Date: 12/11/2021 Debtor: GULF COAST HEALTH CARE, LLC	
UNSECURED	Claimed:	\$10,000,000.00	
GRAMLING, JOHN 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609		Claim Number: 20199 Claim Date: 12/11/2021 Debtor: NF SUWANNEE, LLC	
UNSECURED	Claimed:	\$10,000,000.00	
GRASS ROOTS COMPLETE LLC 2775 BURRIS RD, STE 7B DAVIE, FL 33314		Claim Number: 74 Claim Date: 11/15/2021 Debtor: FL HUD MARGATE, LLC	
UNSECURED	Claimed:	\$10,325.00	
GRC SERVICES 2775 BURRIS RD, STE 7B DAVIE, FL 33314		Claim Number: 212 Claim Date: 12/13/2021 Debtor: FL HUD MARGATE, LLC	
UNSECURED	Claimed:	\$10,325.00	Scheduled: \$10,398.75

GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

GREEN, ARKIMBERLY SHOEMAKE 10525 CAL LN, #43 GULFPORT, MS 39503	Claim Number: 130 Claim Date: 11/26/2021 Debtor: GULF COAST HEALTH CARE, LLC
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ADMINISTRATIVE	Claimed:	\$0.00	UNDET
PRIORITY	Claimed:	\$0.00	UNDET
SECURED	Claimed:	\$0.00	UNDET

GREENE, AMBROSINE C/O POLITIS & MATOVINA PA ATTN DAVID A SHEKHTER, ESQ 20 AIRPORT RD, STE C PALM COAST, FL 32164	Claim Number: 20279 Claim Date: 12/14/2021 Debtor: MF FLAGLER, LLC
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UNSECURED	Claimed:	\$75,000.00	UNLIQ
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GUARDIAN - IPCO, INC. PO BOX 380128 BIRMINGHAM, AL 35238	Claim Number: 395 Claim Date: 01/03/2022 Debtor: NF CHIPOLA, LLC
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UNSECURED	Claimed:	\$725.64
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GUARDIAN - IPCO, INC. PO BOX 380128 BIRMINGHAM, AL 35238	Claim Number: 396 Claim Date: 01/03/2022 Debtor: FL HUD BAYSIDE, LLC
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UNSECURED	Claimed:	\$483.75
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GULF COAST MOLECULAR LABORATORIES LLC 11617 US HWY 31, STE 3 SPANISH FORT, AL 36525	Claim Number: 290 Claim Date: 12/21/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$1,000.00	Scheduled:	\$1,000.00
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GULF COAST HEALTH CARE, LLC
Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

GULF POWER COMPANY ATTN BANKRUPTCY RRD/LFO 4200 W FLAGLER ST CORAL GABLES, FL 33134	Claim Number: 25 Claim Date: 10/27/2021 Debtor: FL HUD BAYBREEZE, LLC
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UNSECURED	Claimed:	\$15,365.00
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GULF POWER COMPANY ATTN BANKRUPTCY RRD/LFO 4200 W FLAGLER ST CORAL GABLES, FL 33134	Claim Number: 26 Claim Date: 10/27/2021 Debtor: FL HUD BAYSIDE, LLC
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UNSECURED	Claimed:	\$11,289.77
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GULF POWER COMPANY ATTN BANKRUPTCY RRD/LFO 4200 W FLAGLER ST CORAL GABLES, FL 33134	Claim Number: 27 Claim Date: 10/27/2021 Debtor: FL HUD PENSACOLA, LLC
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UNSECURED	Claimed:	\$6,111.18
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GULF POWER COMPANY ATTN BK RRD/LFO 4200 W FLAGLER ST CORAL GABLES, FL 33134	Claim Number: 42 Claim Date: 11/05/2021 Debtor: FL HUD PENSACOLA, LLC
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UNSECURED	Claimed:	\$6,111.18
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GULF POWER COMPANY ATTN BK RRD/LFO 4200 W FLAGLER ST CORAL GABLES, FL 33134	Claim Number: 43 Claim Date: 11/05/2021 Debtor: FL HUD BAYBREEZE, LLC
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UNSECURED	Claimed:	\$15,365.00
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GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

GULF POWER COMPANY
 ATTN BK RRD/LFO
 4200 W FLAGLER ST
 CORAL GABLES, FL 33134

Claim Number: 44
 Claim Date: 11/05/2021
 Debtor: FL HUD BAYSIDE, LLC

UNSECURED Claimed: \$11,289.77

HALL BOOTH SMITH PC
 ATTN R RHETT OWENS
 2001 PARK PL N, STE 870
 BIRMINGHAM, AL 35203

Claim Number: 263
 Claim Date: 12/16/2021
 Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED Claimed: \$12,462.68

HAWKS, MARY M
 4582 RESMONDO LN
 PENSACOLA, FL 32526

Claim Number: 146
 Claim Date: 12/03/2021
 Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED Claimed: \$0.00 UNDET

HAZELTON, SHELANA
 203 N GADSDEN ST
 TALLAHASSEE, FL 32301

Claim Number: 20072
 Claim Date: 11/30/2021
 Debtor: NF PANAMA, LLC
 Comments:
 Claim Out of Balance Claim out of balance

ADMINISTRATIVE	Claimed:	\$15,000.00
PRIORITY	Claimed:	\$15,000.00
TOTAL	Claimed:	\$15,000.00

HEMSLEY, SCOTT K (DECEASED)
 C/O ROBIN DOZIER
 2605 ARNOLD ST
 BAY SAINT LOUIS, MS 39520

Claim Number: 152
 Claim Date: 12/06/2021
 Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED Claimed: \$0.00 UNDET

GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

HERBERT, DANIEL C/O COZEN O'CONNOR ATTN THOMAS J FRANCELLA JR 1201 N MARKET ST, STE 1001 WILMINGTON, DE 19801	Claim Number: 194 Claim Date: 12/08/2021 Debtor: NF ESCAMBIA, LLC
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UNSECURED	Claimed:	\$350,000.00
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HEROMAN SERVICES PLANT COMPANY LLC 3601 N DAVIS HWY PENSACOLA, FL 32503	Claim Number: 20275 Claim Date: 12/14/2021 Debtor: FL HUD BAYBREEZE, LLC
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UNSECURED	Claimed:	\$8,461.67
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HEROMAN SERVICES PLANT COMPANY LLC 3601 N DAVIS HWY PENSACOLA, FL 32503	Claim Number: 20276 Claim Date: 12/14/2021 Debtor: FL HUD BAYSIDE, LLC
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UNSECURED	Claimed:	\$4,491.56
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HEROMAN SERVICES PLANT COMPANY LLC 3601 N DAVIS HWY PENSACOLA, FL 32503	Claim Number: 20277 Claim Date: 12/14/2021 Debtor: FL HUD PENSACOLA, LLC
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UNSECURED	Claimed:	\$704.20
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HEROMAN SERVICES PLANT COMPANY LLC 3601 N DAVIS HWY PENSACOLA, FL 32503	Claim Number: 20278 Claim Date: 12/14/2021 Debtor: NF PENSACOLA MANOR, LLC
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UNSECURED	Claimed:	\$9,495.42
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GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

HILL, ARJEWEL HILL C/O CLIFFORD HILL, PR 919 N MARKET ST, STE 1410 WILMINGTON, DE 19801-3046	Claim Number: 20019 Claim Date: 11/15/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$250,000.00
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HILL, KIA 203 N GADSDEN ST TALLAHASSEE, FL 32301	Claim Number: 20071 Claim Date: 11/30/2021 Debtor: NF BRYNWOOD, LLC Comments: Claim Out of Balance Claim out of balance
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ADMINISTRATIVE	Claimed:	\$30,000.00
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PRIORITY	Claimed:	\$30,000.00
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TOTAL	Claimed:	\$30,000.00
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HOCHRUN, SUSAN 4 CYPRESS CT SW LABELLE, FL 33935	Claim Number: 389 Claim Date: 12/28/2021 Debtor: SF OAKBROOK, LLC
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UNSECURED	Claimed:	\$13,634.79	Scheduled:	\$6,247.86
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HOUSING AND HEALTHCARE FINANCE LLC ATTN NADER A AMER 700 NW 1ST AVE, STE 1200 MIAMI, FL 33136	Claim Number: 20392 Claim Date: 12/30/2021 Debtor: GULF COAST MASTER TENANT II, LLC
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SECURED	Claimed:	\$19,158,976.75
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HOUSING AND HEALTHCARE FINANCE LLC ATTN NADER A AMER 700 NW 1ST AVE, STE 1200 MIAMI, FL 33136	Claim Number: 20393 Claim Date: 12/30/2021 Debtor: MS SINGING, LLC
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SECURED	Claimed:	\$19,158,976.75
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GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

HOUSING AND HEALTHCARE FINANCE LLC ATTN NADER A AMER 700 NW 1ST AVE, STE 1200 MIAMI, FL 33136	Claim Number: 20394 Claim Date: 12/30/2021 Debtor: MS LAKESIDE, LLC
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SECURED	Claimed:	\$19,158,976.75
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HRABOVSKY, MARY C/O EDWARD HRABOVSKY, PR 919 N MARKET ST, STE 1410 WILMINGTON, DE 19801-3046	Claim Number: 20029 Claim Date: 11/17/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$24,000.00
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HUDSON INSURANCE COMPANY PO BOX 1064 ODESSA, FL 33556	Claim Number: 20064 Claim Date: 11/29/2021 Debtor: MS HUD OCEAN SPRINGS, LLC
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UNSECURED	Claimed:	\$7,667.43
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HUDSON INSURANCE COMPANY C/O LAW OFFICE OF STEPHANIE M JOHNSON PO BOX 1064 ODESSA, FL 33556	Claim Number: 20065 Claim Date: 11/29/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$7,667.43
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HUMANA INC, HUMANA INSURANCE CO, ET AL C/O FOX SWIBEL LEVIN & CARROLL ATTN KEN THOMAS 200 W MADISON, STE 3000 CHICAGO, IL 60606	Claim Number: 334 Claim Date: 12/22/2021 Debtor: GULF COAST HEALTH CARE, LLC
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SECURED	Claimed:	\$323,575.92 UNLIQ
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GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

HUMANA INC, HUMANA INSURANCE CO, ET AL C/O FOX SWIBEL LEVIN & CARROLL ATTN KEN THOMAS 200 W MADISON, STE 3000 CHICAGO, IL 60606	Claim Number: 336 Claim Date: 12/22/2021 Debtor: BREVARD OAKS CENTER, LLC
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SECURED	Claimed:	\$14,463.65	UNLIQ
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HUMANA INC, HUMANA INSURANCE CO, ET AL C/O FOX SWIBEL LEVIN & CARROLL ATTN KEN THOMAS 200 W MADISON, STE 3000 CHICAGO, IL 60606	Claim Number: 337 Claim Date: 12/22/2021 Debtor: FL HUD BAYBREEZE, LLC
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SECURED	Claimed:	\$8,132.36	UNLIQ
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HUMANA INC, HUMANA INSURANCE CO, ET AL C/O FOX SWIBEL LEVIN & CARROLL ATTN KEN THOMAS 200 W MADISON, STE 3000 CHICAGO, IL 60606	Claim Number: 338 Claim Date: 12/22/2021 Debtor: FL HUD DESTIN, LLC
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SECURED	Claimed:	\$2,495.28	UNLIQ
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HUMANA INC, HUMANA INSURANCE CO, ET AL C/O FOX SWIBEL LEVIN & CARROLL ATTN KEN THOMAS 200 W MADISON, STE 3000 CHICAGO, IL 60606	Claim Number: 339 Claim Date: 12/22/2021 Debtor: FL HUD MARGATE, LLC
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SECURED	Claimed:	\$2,017.68	UNLIQ
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HUMANA INC, HUMANA INSURANCE CO, ET AL C/O FOX SWIBEL LEVIN & CARROLL ATTN KEN THOMAS 200 W MADISON, STE 3000 CHICAGO, IL 60606	Claim Number: 340 Claim Date: 12/22/2021 Debtor: FL HUD ROSEWOOD, LLC
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SECURED	Claimed:	\$2,699.53	UNLIQ
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

HUMANA INC, HUMANA INSURANCE CO, ET AL C/O FOX SWIBEL LEVIN & CARROLL ATTN KEN THOMAS 200 W MADISON, STE 3000 CHICAGO, IL 60606	Claim Number: 341 Claim Date: 12/22/2021 Debtor: MF DEBARY, LLC
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SECURED	Claimed:	\$461.96 UNLIQ
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HUMANA INC, HUMANA INSURANCE CO, ET AL C/O FOX SWIBEL LEVIN & CARROLL ATTN KEN THOMAS 200 W MADISON, STE 3000 CHICAGO, IL 60606	Claim Number: 342 Claim Date: 12/22/2021 Debtor: MF LONGWOOD, LLC
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SECURED	Claimed:	\$1,453.92 UNLIQ
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HUMANA INC, HUMANA INSURANCE CO, ET AL C/O FOX SWIBEL LEVIN & CARROLL ATTN KEN THOMAS 200 W MADISON, STE 3000 CHICAGO, IL 60606	Claim Number: 343 Claim Date: 12/22/2021 Debtor: MF OAKWOOD, LLC
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SECURED	Claimed:	\$30,266.35 UNLIQ
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HUMANA INC, HUMANA INSURANCE CO, ET AL C/O FOX SWIBEL LEVIN & CARROLL ATTN KEN THOMAS 200 W MADISON, STE 3000 CHICAGO, IL 60606	Claim Number: 344 Claim Date: 12/22/2021 Debtor: MF WINTER PARK, LLC
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SECURED	Claimed:	\$1,170.18 UNLIQ
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HUMANA INC, HUMANA INSURANCE CO, ET AL C/O FOX SWIBEL LEVIN & CARROLL ATTN KEN THOMAS 200 W MADISON, STE 3000 CHICAGO, IL 60606	Claim Number: 345 Claim Date: 12/22/2021 Debtor: MS GREENBOUGH, LLC
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SECURED	Claimed:	\$8,706.56 UNLIQ
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

HUMANA INC, HUMANA INSURANCE CO, ET AL C/O FOX SWIBEL LEVIN & CARROLL ATTN KEN THOMAS 200 W MADISON, STE 3000 CHICAGO, IL 60606	Claim Number: 346 Claim Date: 12/22/2021 Debtor: MS HUD BOYINGTON, LLC
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SECURED	Claimed:	\$19,101.74	UNLIQ
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HUMANA INC, HUMANA INSURANCE CO, ET AL C/O FOX SWIBEL LEVIN & CARROLL ATTN KEN THOMAS 200 W MADISON, STE 3000 CHICAGO, IL 60606	Claim Number: 347 Claim Date: 12/22/2021 Debtor: MS HUD DIXIE, LLC
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SECURED	Claimed:	\$286.61	UNLIQ
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HUMANA INC, HUMANA INSURANCE CO, ET AL C/O FOX SWIBEL LEVIN & CARROLL ATTN KEN THOMAS 200 W MADISON, STE 3000 CHICAGO, IL 60606	Claim Number: 348 Claim Date: 12/22/2021 Debtor: MS HUD OCEAN SPRINGS, LLC
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SECURED	Claimed:	\$3,676.07	UNLIQ
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HUMANA INC, HUMANA INSURANCE CO, ET AL C/O FOX SWIBEL LEVIN & CARROLL ATTN KEN THOMAS 200 W MADISON, STE 3000 CHICAGO, IL 60606	Claim Number: 349 Claim Date: 12/22/2021 Debtor: MS HUD PINE VIEW, LLC
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SECURED	Claimed:	\$17,830.14	UNLIQ
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HUMANA INC, HUMANA INSURANCE CO, ET AL C/O FOX SWIBEL LEVIN & CARROLL ATTN KEN THOMAS 200 W MADISON, STE 3000 CHICAGO, IL 60606	Claim Number: 350 Claim Date: 12/22/2021 Debtor: MS LAKESIDE, LLC
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SECURED	Claimed:	\$1,887.30	UNLIQ
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

HUMANA INC, HUMANA INSURANCE CO, ET AL C/O FOX SWIBEL LEVIN & CARROLL ATTN KEN THOMAS 200 W MADISON, STE 3000 CHICAGO, IL 60606	Claim Number: 351 Claim Date: 12/22/2021 Debtor: MS SHELBY, LLC
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SECURED	Claimed: \$128.56 UNLIQ
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HUMANA INC, HUMANA INSURANCE CO, ET AL C/O FOX SWIBEL LEVIN & CARROLL ATTN KEN THOMAS 200 W MADISON, STE 3000 CHICAGO, IL 60606	Claim Number: 352 Claim Date: 12/22/2021 Debtor: MS SINGING, LLC
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SECURED	Claimed: \$22,137.95 UNLIQ
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HUMANA INC, HUMANA INSURANCE CO, ET AL C/O FOX SWIBEL LEVIN & CARROLL ATTN KEN THOMAS 200 W MADISON, STE 3000 CHICAGO, IL 60606	Claim Number: 353 Claim Date: 12/22/2021 Debtor: NF BRYNWOOD, LLC
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SECURED	Claimed: \$2,010.62 UNLIQ
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HUMANA INC, HUMANA INSURANCE CO, ET AL C/O FOX SWIBEL LEVIN & CARROLL ATTN KEN THOMAS 200 W MADISON, STE 3000 CHICAGO, IL 60606	Claim Number: 354 Claim Date: 12/22/2021 Debtor: NF CHIPOLA, LLC
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SECURED	Claimed: \$3,503.76 UNLIQ
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HUMANA INC, HUMANA INSURANCE CO, ET AL C/O FOX SWIBEL LEVIN & CARROLL ATTN KEN THOMAS 200 W MADISON, STE 3000 CHICAGO, IL 60606	Claim Number: 355 Claim Date: 12/22/2021 Debtor: NF MANOR, LLC
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SECURED	Claimed: \$2,351.64 UNLIQ
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

HUMANA INC, HUMANA INSURANCE CO, ET AL C/O FOX SWIBEL LEVIN & CARROLL ATTN KEN THOMAS 200 W MADISON, STE 3000 CHICAGO, IL 60606	Claim Number: 356 Claim Date: 12/22/2021 Debtor: NF NINE MILE, LLC
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SECURED	Claimed:	\$34,921.56	UNLIQ
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HUMANA INC, HUMANA INSURANCE CO, ET AL C/O FOX SWIBEL LEVIN & CARROLL ATTN KEN THOMAS 200 W MADISON, STE 3000 CHICAGO, IL 60606	Claim Number: 357 Claim Date: 12/22/2021 Debtor: NF PENSACOLA MANOR, LLC
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SECURED	Claimed:	\$16,500.00	UNLIQ
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HUMANA INC, HUMANA INSURANCE CO, ET AL C/O FOX SWIBEL LEVIN & CARROLL ATTN KEN THOMAS 200 W MADISON, STE 3000 CHICAGO, IL 60606	Claim Number: 358 Claim Date: 12/22/2021 Debtor: NF SUWANNEE, LLC
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SECURED	Claimed:	\$3,011.68	UNLIQ
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HUMANA INC, HUMANA INSURANCE CO, ET AL C/O FOX SWIBEL LEVIN & CARROLL ATTN KEN THOMAS 200 W MADISON, STE 3000 CHICAGO, IL 60606	Claim Number: 359 Claim Date: 12/22/2021 Debtor: NF WINDSOR, LLC
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SECURED	Claimed:	\$60,252.55	UNLIQ
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HUMANA INC, HUMANA INSURANCE CO, ET AL C/O FOX SWIBEL LEVIN & CARROLL ATTN KEN THOMAS 200 W MADISON, STE 3000 CHICAGO, IL 60606	Claim Number: 360 Claim Date: 12/22/2021 Debtor: SC-GA2018 COBBLESTONE REHABILITATION
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SECURED	Claimed:	\$888.56	UNLIQ
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

HUMANA INC, HUMANA INSURANCE CO, ET AL C/O FOX SWIBEL LEVIN & CARROLL ATTN KEN THOMAS 200 W MADISON, STE 3000 CHICAGO, IL 60606	Claim Number: 361 Claim Date: 12/22/2021 Debtor: SF BOYNTON, LLC
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SECURED	Claimed:	\$16,102.09	UNLIQ
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HUMANA INC, HUMANA INSURANCE CO, ET AL C/O FOX SWIBEL LEVIN & CARROLL ATTN KEN THOMAS 200 W MADISON, STE 3000 CHICAGO, IL 60606	Claim Number: 362 Claim Date: 12/22/2021 Debtor: SF BREVARD, LLC
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SECURED	Claimed:	\$33,204.91	UNLIQ
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HUMANA INC, HUMANA INSURANCE CO, ET AL C/O FOX SWIBEL LEVIN & CARROLL ATTN KEN THOMAS 200 W MADISON, STE 3000 CHICAGO, IL 60606	Claim Number: 363 Claim Date: 12/22/2021 Debtor: SF GLEN OAKS, LLC
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SECURED	Claimed:	\$2,900.00	UNLIQ
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HUMANA INC, HUMANA INSURANCE CO, ET AL C/O FOX SWIBEL LEVIN & CARROLL ATTN KEN THOMAS 200 W MADISON, STE 3000 CHICAGO, IL 60606	Claim Number: 364 Claim Date: 12/22/2021 Debtor: SF KISSIMMEE, LLC
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SECURED	Claimed:	\$662.71	UNLIQ
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HUMANA INC, HUMANA INSURANCE CO, ET AL C/O FOX SWIBEL LEVIN & CARROLL ATTN KEN THOMAS 200 W MADISON, STE 3000 CHICAGO, IL 60606	Claim Number: 365 Claim Date: 12/22/2021 Debtor: SF LAKE PLACID, LLC
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SECURED	Claimed:	\$8,700.00	UNLIQ
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GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

HUMANA INC, HUMANA INSURANCE CO, ET AL C/O FOX SWIBEL LEVIN & CARROLL ATTN KEN THOMAS 200 W MADISON, STE 3000 CHICAGO, IL 60606	Claim Number: 366 Claim Date: 12/22/2021 Debtor: SF SALERNO, LLC
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SECURED	Claimed:	\$1,650.00 UNLIQ
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IKE, RICHARD J JR 505 N MILLS AVE ORLANDO, FL 32803	Claim Number: 20360 Claim Date: 12/27/2021 Debtor: SF LAKE PLACID, LLC
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UNSECURED	Claimed:	\$650,000.00
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INTERCONN RESOURCES LLC ATTN TAD TEMPLETON 2000A SOUTHRIDGE PKWY, STE 330 BIRMINGHAM, AL 35209	Claim Number: 20290 Claim Date: 12/16/2021 Debtor: SF CARNEGIE, LLC
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UNSECURED	Claimed:	\$592.97
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INTERCONN RESOURCES LLC ATTN TAD TEMPLETON 2000A SOUTHRIDGE PKWY, STE 330 BIRMINGHAM, AL 35209	Claim Number: 20292 Claim Date: 12/16/2021 Debtor: FL HUD MARGATE, LLC
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UNSECURED	Claimed:	\$842.47
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INTERCONN RESOURCES LLC ATTN TAD TEMPLETON 2000A SOUTHRIDGE PKWY, STE 330 BIRMINGHAM, AL 35209	Claim Number: 20293 Claim Date: 12/16/2021 Debtor: MF LAKE EUSTIS, LLC
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UNSECURED	Claimed:	\$346.71
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GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

INTERCONN RESOURCES LLC ATTN TAD TEMPLETON 2000A SOUTHBRIDGE PKWY, STE 330 BIRMINGHAM, AL 35209	Claim Number: 20294 Claim Date: 12/16/2021 Debtor: MF WINTER PARK, LLC
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UNSECURED	Claimed:	\$411.48
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INTERNAL MEDICINE & GERIATRICS PA 2571 W EAU GALLIE BLVD, STE 4 MELBOURNE, FL 32935	Claim Number: 20270 Claim Date: 12/13/2021 Debtor: SF CARNEGIE, LLC
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PRIORITY	Claimed:	\$13,258.06
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JACKSON COUNTY TAX COLLECTOR PO BOX 998 PASCAGOULA, MS 39568	Claim Number: 221 Claim Date: 12/13/2021 Debtor: GULF COAST HEALTH CARE, LLC Comments: Claim Out of Balance Claim out of balance
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PRIORITY	Claimed:	\$133,746.92	Scheduled:	\$0.00 UNLIQ
SECURED	Claimed:	\$133,746.92		
TOTAL	Claimed:	\$133,746.92		

JACKSON, VIRGINIA L 6804 MARTINIQUE DR BILOXI, MS 39531	Claim Number: 132 Claim Date: 11/29/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$0.00 UNDET
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JEANFREAU, NICOLE 23557 PLACIDE RD PASS CHRISTIAN, MS 39571	Claim Number: 20074 Claim Date: 11/30/2021 Debtor: GULF COAST HEALTH CARE, LLC Comments: POSSIBLY AMENDED BY 20075 Claim Out of Balance Claim out of balance
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ADMINISTRATIVE	Claimed:	\$10,125.00
PRIORITY	Claimed:	\$10,125.00
TOTAL	Claimed:	\$10,125.00

GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

JEANFREAU, NICOLE 23557 PLACIDE RD PASS CHRISTIAN, MS 39571		Claim Number: 20075 Claim Date: 11/30/2021 Debtor: GULF COAST HEALTH CARE, LLC Comments: Claim Out of Balance Claim out of balance
ADMINISTRATIVE	Claimed:	\$10,125.00
PRIORITY	Claimed:	\$10,125.00
TOTAL	Claimed:	\$10,125.00
JJT NO 1 LLC C/O LOCKE LORD LLP ATTN DAVID L SWANSON 2800 ROSS AVE, STE 2200 DALLAS, TX 75201		Claim Number: 79 Claim Date: 11/15/2021 Debtor: GULF COAST MASTER TENANT I, LLC
UNSECURED	Claimed:	\$180,000.00
JOHN FAYARD MOVING AND WAREHOUSING LLC D/B/A JOHN FAYARD RECORDS MANAGEMENT C/O DUMMER LAW GROUP PLLC 796 HOWARD AVE, 1ST FL BILOXI, MS 39530		Claim Number: 222 Claim Date: 12/13/2021 Debtor: GULF COAST HEALTH CARE, LLC
SECURED	Claimed:	\$887.00
JOHN, VIRGINIA C/O JUDY WARD & BONNIE BOX, PRS 919 N MARKET ST, STE 1410 WILMINGTON, DE 19801		Claim Number: 20051 Claim Date: 11/19/2021 Debtor: GULF COAST HEALTH CARE, LLC
UNSECURED	Claimed:	\$350,000.00
JOHNSON, JOSEPH C/O DIANE PAUL, PR 919 N MARKET ST, STE 1410 WILMINGTON, DE 19801		Claim Number: 20039 Claim Date: 11/18/2021 Debtor: GULF COAST HEALTH CARE, LLC
UNSECURED	Claimed:	\$275,000.00

GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

JOHNSON, LILLIE C/O EULA RUFFIN, PR 919 N MARKET ST, STE 1410 WILMINGTON, DE 19801	Claim Number: 20043 Claim Date: 11/18/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$250,000.00
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JOHNSON, ROBERT C/O ALVIN JOHNSON, PR 919 N MARKET ST, STE 1410 WILMINGTON, DE 19801-3046	Claim Number: 20018 Claim Date: 11/15/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$400,000.00
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JOHNSON, SHUNTAYE D 735 RILEY ST CLARKSDALE, MS 38614	Claim Number: 148 Claim Date: 12/03/2021 Debtor: GULF COAST HEALTH CARE, LLC Comments: Claim out of balance
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ADMINISTRATIVE	Claimed:	\$15,987.00
PRIORITY	Claimed:	\$15,987.00
TOTAL	Claimed:	\$15,987.00

JOINT COMMISSION, THE 1 RENAISSANCE BLVD OAKBROOK TERRACE, IL 60181	Claim Number: 153 Claim Date: 12/06/2021 Debtor: MF LAKE EUSTIS, LLC
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UNSECURED	Claimed:	\$2,725.00
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JOINT COMMISSION, THE 1 RENAISSANCE BLVD OAKBROOK TERRACE, IL 60181	Claim Number: 154 Claim Date: 12/06/2021 Debtor: FL HUD DESTIN, LLC
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UNSECURED	Claimed:	\$4,040.00
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GULF COAST HEALTH CARE, LLC
Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

JOINT COMMISSION, THE 1 RENAISSANCE BLVD OAKBROOK TERRACE, IL 60181	Claim Number: 155 Claim Date: 12/06/2021 Debtor: SF BREVARD, LLC
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UNSECURED	Claimed:	\$4,040.00
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JONES, CRISTAL C/O PAULA JONES, PR 919 N MARKET ST, STE 1410 WILMINGTON, DE 19801-3046	Claim Number: 20023 Claim Date: 11/16/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$265,000.00
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JONES, GERALDINE M (DECEASED) C/O WILLIAM S JONES 904 BROKEN ARROW LN CANTONMENT, FL 32533	Claim Number: 282 Claim Date: 12/20/2021 Debtor: GULF COAST HEALTH CARE, LLC
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PRIORITY	Claimed:	\$2,214.76
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JURCEKA, CHARLES C/O CHERYL JURCEKA, POA 919 N MARKET ST, STE 1410 WILMINGTON, DE 19801-3046	Claim Number: 20004 Claim Date: 11/15/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$250,000.00
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JWF COMPANY INC D/B/A MELODY MUSIC COMPANY PO BOX 707 702 N 2ND AVE COLUMBUS, MS 39703-0707	Claim Number: 157 Claim Date: 12/06/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$288.90
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GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

JWFL TRANSPORTATION D/B/A DDJ TRANSPORT 3505 LAKE LYNDIA DR, STE 200 ORLANDO, FL 32817	Claim Number: 20090 Claim Date: 12/06/2021 Debtor: MF WINTER PARK, LLC
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UNSECURED	Claimed:	\$24,181.51
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KINTZ, JOANNE C/O CHERI KINTZ-ROBERTS, PR 919 N MARKET ST, STE 1410 WILMINGTON, DE 19801-3046	Claim Number: 20006 Claim Date: 11/15/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$30,000.00
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KITCHELL, IRENE C/O DAVID KITCHELL, PR 919 N MARKET ST, STE 1410 WILMINGTON, DE 19801	Claim Number: 20048 Claim Date: 11/18/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$1,000,000.00
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KLEMENT, DAVID B 1749 SW LEAFY RD PORT SAINT LUCIE, FL 34953-1356	Claim Number: 156 Claim Date: 12/06/2021 Debtor: GULF COAST HEALTH CARE, LLC
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PRIORITY	Claimed:	\$0.00 UNDET
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LAMAR ADVERTISING COMPANY ATTN CREDIT DEPARTMENT PO BOX 66338 BATON ROUGE, LA 70896	Claim Number: 379 Claim Date: 12/27/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$1,700.00
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

LAUNDRY SOUTH SYSTEMS & REPAIR
2215 HWY 80 E
PEARL, MS 39208

Claim Number: 20056
Claim Date: 11/23/2021
Debtor: MS GREENBOUGH, LLC

UNSECURED	Claimed:	\$32.96	Scheduled:	\$32.96
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LAUNDRY SOUTH SYSTEMS & REPAIR
2215 HWY 80 E
PEARL, MS 39208

Claim Number: 20057
Claim Date: 11/23/2021
Debtor: MS SINGING, LLC

UNSECURED	Claimed:	\$765.25	Scheduled:	\$632.37
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LAUNDRY SOUTH SYSTEMS & REPAIR
2215 HWY 80 E
PEARL, MS 39208

Claim Number: 20058
Claim Date: 11/23/2021
Debtor: AL CITRONELLE, LLC

UNSECURED	Claimed:	\$501.14
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LAWRENCE, JIM
2040 RENEGADE LN
MILTON, FL 32583

Claim Number: 142
Claim Date: 12/02/2021
Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED	Claimed:	\$1,500.00
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LEE, ROBIN AND BRUCE
C/O JOHNSON POPE BOKOR RUPPEL & BURNS
ATTN ALBERTO F GOMEZ JR
401 E JACKSON ST, STE 3100
TAMPA, FL 33602

Claim Number: 20104
Claim Date: 12/08/2021
Debtor: SF LAKE PLACID, LLC

UNSECURED	Claimed:	\$400,000.00 UNLIQ
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

LEFILES, EDDIE H C/O MICHLES & BOOTH PA ATTN CHRISTOPHER P JANES 501 BRENT LN PENSACOLA, FL 32503	Claim Number: 20322 Claim Date: 12/22/2021 Debtor: NF ESCAMBIA, LLC Comments: POSSIBLY AMENDED BY 20326
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UNSECURED	Claimed:	\$1,000,000.00
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LEFILES, EDDIE H C/O MICHLES & BOOTH PA ATTN CHRISTOPHER P JANES 501 BRENT LN PENSACOLA, FL 32503	Claim Number: 20326 Claim Date: 12/22/2021 Debtor: NF ESCAMBIA, LLC Comments: AMENDS CLAIM #20322
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UNSECURED	Claimed:	\$1,000,000.00
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LEONARD, RODNEY C/O VIRGINIA LEONARD, PR 919 N MARKET ST, STE 1410 WILMINGTON, DE 19801-3046	Claim Number: 20008 Claim Date: 11/15/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$30,000.00
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LEOPARD TRANSPORT OF CENTRAL FLORIDA 121 W HERMOSTA ST LADY LAKE, FL 32159	Claim Number: 28 Claim Date: 11/02/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$39,740.00
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LEV DIAGNOSTICS 3605 WOODHEAD DR, STE #111 NORTHBROOK, IL 60062	Claim Number: 47 Claim Date: 11/08/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$920.00
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

LOTT, JIMMY C/O TAMMY COOK, PR 919 N MARKET ST, STE 1410 WILMINGTON, DE 19801-3046	Claim Number: 20014 Claim Date: 11/15/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed: \$130,000.00
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MAGRANE, JOAN M 1255 26TH ST, LOT #30 VERO BEACH, FL 32960	Claim Number: 149 Claim Date: 12/06/2021 Debtor: GULF COAST HEALTH CARE, LLC
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PRIORITY	Claimed: \$0.00 UNDET
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MALONE, MARSELLIA C/O ANTHONY & PARTNERS ATTN JOHN ANTHONY, ESQ 100 S ASHLEY DR, STE 1600 TAMPA, FL 33602	Claim Number: 20013 Claim Date: 11/15/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed: \$550,000.00
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MARION PARKER BY LAROSE WANTLAND-BUSBY PO BOX 2225 MOBILE, AL 36652	Claim Number: 20304 Claim Date: 12/20/2021 Debtor: MS HUD OCEAN SPRINGS, LLC
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UNSECURED	Claimed: \$1,000,000.00 UNLIQ
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MARTIN, AARON 149 CREEKVIEW DR PENSACOLA, FL 32503	Claim Number: 20115 Claim Date: 12/08/2021 Debtor: GULF COAST HEALTH CARE, LLC Comments: POSSIBLY AMENDED BY 20331
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UNSECURED	Claimed: \$9,000.00
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MARTIN, AARON 149 CREEKVIEW DR PENSACOLA, FL 32503		Claim Number: 20331 Claim Date: 12/23/2021 Debtor: GULF COAST HEALTH CARE, LLC Comments: AMENDS CLAIM #20115	
PRIORITY	Claimed:	\$9,000.00	
MATT CARLSON LLC 18031 CEDARDALE RD SAUCIER, MS 39574		Claim Number: 20286 Claim Date: 12/15/2021 Debtor: GULF COAST HEALTH CARE, LLC	
PRIORITY	Claimed:	\$13,650.00	
UNSECURED	Claimed:	\$12,027.42	
MAVEN HEALTH PARTNERS LLC 551 ROOSEVELT RD, #221 GLEN ELLYN, IL 60137		Claim Number: 91 Claim Date: 11/18/2021 Debtor: GULF COAST HEALTH CARE, LLC	
PRIORITY	Claimed:	\$47,712.00	
MAVEN HEALTH PARTNERS LLC 551 ROOSEVELT RD, #221 GLEN ELLYN, IL 60137		Claim Number: 20364 Claim Date: 12/28/2021 Debtor: SF BREVARD, LLC	
PRIORITY	Claimed:	\$1,812.00	
UNSECURED		Scheduled:	\$1,812.00
MAVEN HEALTH PARTNERS LLC 551 ROOSEVELT RD, #221 GLEN ELLYN, IL 60137		Claim Number: 20365 Claim Date: 12/28/2021 Debtor: NF SUWANNEE, LLC	
PRIORITY	Claimed:	\$800.00	
UNSECURED		Scheduled:	\$800.00

GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

MAVEN HEALTH PARTNERS LLC
551 ROOSEVELT RD, #221
GLEN ELLYN, IL 60137

Claim Number: 20366
Claim Date: 12/28/2021
Debtor: NF PENSACOLA MANOR, LLC

PRIORITY Claimed: \$5,950.00
UNSECURED

Scheduled: \$5,950.00

MAVEN HEALTH PARTNERS LLC
551 ROOSEVELT RD, #221
GLEN ELLYN, IL 60137

Claim Number: 20367
Claim Date: 12/28/2021
Debtor: NF NINE MILE, LLC

PRIORITY Claimed: \$7,650.00
UNSECURED

Scheduled: \$7,650.00

MAVEN HEALTH PARTNERS LLC
551 ROOSEVELT RD, #221
GLEN ELLYN, IL 60137

Claim Number: 20368
Claim Date: 12/28/2021
Debtor: NF CHIPOLA, LLC

PRIORITY Claimed: \$5,950.00
UNSECURED

Scheduled: \$5,950.00

MAVEN HEALTH PARTNERS LLC
551 ROOSEVELT RD, #221
GLEN ELLYN, IL 60137

Claim Number: 20369
Claim Date: 12/28/2021
Debtor: MF WINTER PARK, LLC

PRIORITY Claimed: \$850.00
UNSECURED

Scheduled: \$850.00

MAVEN HEALTH PARTNERS LLC
551 ROOSEVELT RD, #221
GLEN ELLYN, IL 60137

Claim Number: 20370
Claim Date: 12/28/2021
Debtor: FL HUD SILVERCREST, LLC

PRIORITY Claimed: \$1,600.00
UNSECURED

Scheduled: \$1,600.00

GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

MAVEN HEALTH PARTNERS LLC	Claim Number: 20371
551 ROOSEVELT RD, #221	Claim Date: 12/28/2021
GLEN ELLYN, IL 60137	Debtor: FL HUD PENSACOLA, LLC

PRIORITY	Claimed:	\$6,800.00	Scheduled:	\$6,800.00
UNSECURED				

MAVEN HEALTH PARTNERS LLC	Claim Number: 20372
551 ROOSEVELT RD, #221	Claim Date: 12/28/2021
GLEN ELLYN, IL 60137	Debtor: FL HUD MARGATE, LLC

PRIORITY	Claimed:	\$850.00	Scheduled:	\$850.00
UNSECURED				

MAVEN HEALTH PARTNERS LLC	Claim Number: 20373
551 ROOSEVELT RD, #221	Claim Date: 12/28/2021
GLEN ELLYN, IL 60137	Debtor: FL HUD DESTIN, LLC

PRIORITY	Claimed:	\$3,400.00	Scheduled:	\$3,400.00
UNSECURED				

MAVEN HEALTH PARTNERS LLC	Claim Number: 20374
551 ROOSEVELT RD, #221	Claim Date: 12/28/2021
GLEN ELLYN, IL 60137	Debtor: FL HUD BAYSIDE, LLC

PRIORITY	Claimed:	\$1,700.00	Scheduled:	\$1,700.00
UNSECURED				

MCCALLUM, DEBRA M	Claim Number: 265
469 O'NEAL DR	Claim Date: 12/17/2021
HOOVER, AL 35226	Debtor: GULF COAST HEALTH CARE, LLC

PRIORITY	Claimed:	\$3,025.00
UNSECURED	Claimed:	\$5,591.50

GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

MCCLAIN, DEBRA
203 N GADSDEN ST
TALLAHASSEE, FL 32301

Claim Number: 20269
Claim Date: 12/13/2021
Debtor: NF CHIPOLA, LLC

UNSECURED Claimed: \$0.00 UNDET

MCCLELTON, QUEBELL
C/O GEORGE F HOLLOWELL JR
PO DRAWER 1407
GREENVILLE, MS 38702-1407

Claim Number: 20288
Claim Date: 12/15/2021
Debtor: MS GREENBOUGH, LLC

UNSECURED Claimed: \$50,000.00 UNLIQ

MCKENZIE PEST MANAGEMENT INC
111 YELLOW PINE DR
SEBRING, FL 33872

Claim Number: 144
Claim Date: 11/19/2021
Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED Claimed: \$2,160.00

MEANS, QUINTERRIAN
7577 SW 80TH DR
GAINESVILLE, FL 32608

Claim Number: 20061
Claim Date: 11/23/2021
Debtor: GULF COAST HEALTH CARE, LLC
Comments:
Claim Out of Balance Claim out of balance

ADMINISTRATIVE	Claimed:	\$1,496.32
PRIORITY	Claimed:	\$1,496.32
TOTAL	Claimed:	\$1,496.32

MEDICAID DONE RIGHT LLC
13825 ICOT BLVD, STE 611
CLEARWATER, FL 33760

Claim Number: 304
Claim Date: 12/21/2021
Debtor: FL HUD BAYBREEZE, LLC

UNSECURED	Claimed:	\$5,200.00	Scheduled:	\$3,000.00
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

MEDICAID DONE RIGHT LLC
13825 ICOT BLVD, STE 611
CLEARWATER, FL 33760

Claim Number: 305
Claim Date: 12/21/2021
Debtor: FL HUD BAYSIDE, LLC

UNSECURED	Claimed:	\$4,850.00	Scheduled:	\$3,900.00
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MEDICAID DONE RIGHT LLC
13825 ICOT BLVD, STE 611
CLEARWATER, FL 33760

Claim Number: 306
Claim Date: 12/21/2021
Debtor: FL HUD DESTIN, LLC

UNSECURED	Claimed:	\$2,700.00	Scheduled:	\$2,700.00
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MEDICAID DONE RIGHT LLC
13825 ICOT BLVD, STE 611
CLEARWATER, FL 33760

Claim Number: 307
Claim Date: 12/21/2021
Debtor: FL HUD MARGATE, LLC

UNSECURED	Claimed:	\$13,450.00	Scheduled:	\$8,050.00
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MEDICAID DONE RIGHT LLC
13825 ICOT BLVD, STE 611
CLEARWATER, FL 33760

Claim Number: 308
Claim Date: 12/21/2021
Debtor: FL HUD PENSACOLA, LLC

UNSECURED	Claimed:	\$15,500.00	Scheduled:	\$11,700.00
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MEDICAID DONE RIGHT LLC
13825 ICOT BLVD, STE 611
CLEARWATER, FL 33760

Claim Number: 309
Claim Date: 12/21/2021
Debtor: FL HUD ROSEWOOD, LLC

UNSECURED	Claimed:	\$10,350.00	Scheduled:	\$8,550.00
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

MEDICAID DONE RIGHT LLC
13825 ICOT BLVD, STE 611
CLEARWATER, FL 33760

Claim Number: 310
Claim Date: 12/21/2021
Debtor: FL HUD SILVERCREST, LLC

UNSECURED	Claimed:	\$5,650.00	Scheduled:	\$5,200.00
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MEDICAID DONE RIGHT LLC
13825 ICOT BLVD, STE 611
CLEARWATER, FL 33760

Claim Number: 311
Claim Date: 12/21/2021
Debtor: MF LAKE EUSTIS, LLC

UNSECURED	Claimed:	\$6,750.00	Scheduled:	\$6,300.00
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MEDICAID DONE RIGHT LLC
13825 ICOT BLVD, STE 611
CLEARWATER, FL 33760

Claim Number: 312
Claim Date: 12/21/2021
Debtor: MF WINTER PARK, LLC

UNSECURED	Claimed:	\$23,350.00	Scheduled:	\$16,850.00
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MEDICAID DONE RIGHT LLC
13825 ICOT BLVD, STE 611
CLEARWATER, FL 33760

Claim Number: 313
Claim Date: 12/21/2021
Debtor: MS GREENBOUGH, LLC

UNSECURED	Claimed:	\$900.00	Scheduled:	\$900.00
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MEDICAID DONE RIGHT LLC
13825 ICOT BLVD, STE 611
CLEARWATER, FL 33670

Claim Number: 314
Claim Date: 12/21/2021
Debtor: MS SHELBY, LLC

UNSECURED	Claimed:	\$4,050.00	Scheduled:	\$3,600.00
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

MEDICAID DONE RIGHT LLC
13825 ICOT BLVD, STE 611
CLEARWATER, FL 33760

Claim Number: 315
Claim Date: 12/21/2021
Debtor: NF CHIPOLA, LLC

UNSECURED	Claimed:	\$6,300.00	Scheduled:	\$5,400.00
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MEDICAID DONE RIGHT LLC
13825 ICOT BLVD, STE 611
CLEARWATER, FL 33760

Claim Number: 316
Claim Date: 12/21/2021
Debtor: NF ESCAMBIA, LLC

UNSECURED	Claimed:	\$5,400.00	Scheduled:	\$4,950.00
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MEDICAID DONE RIGHT LLC
13825 ICOT BLVD, STE 611
CLEARWATER, FL 33760

Claim Number: 317
Claim Date: 12/21/2021
Debtor: NF PENSACOLA MANOR, LLC

UNSECURED	Claimed:	\$10,050.00	Scheduled:	\$7,400.00
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MEDICAID DONE RIGHT LLC
13825 ICOT BLVD, STE 611
CLEARWATER, FL 33760

Claim Number: 318
Claim Date: 12/21/2021
Debtor: SF BREVARD, LLC

UNSECURED	Claimed:	\$13,450.00	Scheduled:	\$10,300.00
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MEDICAID DONE RIGHT LLC
13825 ICOT BLVD, STE 611
CLEARWATER, FL 33760

Claim Number: 319
Claim Date: 12/21/2021
Debtor: SF CARNEGIE, LLC

UNSECURED	Claimed:	\$5,400.00	Scheduled:	\$3,600.00
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GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

MEDICAID DONE RIGHT LLC 13825 ICOT BLVD, STE 611 CLEARWATER, FL 33760	Claim Number: 320 Claim Date: 12/21/2021 Debtor: NF SUWANNEE, LLC
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UNSECURED	Claimed:	\$27,300.00	Scheduled:	\$23,250.00
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MEDICAID DONE RIGHT LLC 13825 ICOT BLVD, STE 611 CLEARWATER, FL 33760	Claim Number: 321 Claim Date: 12/21/2021 Debtor: BREVARD OAKS CENTER, LLC
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UNSECURED	Claimed:	\$13,000.00	Scheduled:	\$10,750.00
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MEDICAL EQUIPMENT SERVICES INC PO BOX 157 HOLLY SPRINGS, NC 27540	Claim Number: 75 Claim Date: 11/15/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$2,865.00
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MEDICAL EQUIPMENT SERVICES INC PO BOX 157 HOLLY SPRINGS, NC 27540	Claim Number: 376 Claim Date: 12/27/2021 Debtor: SC-GA2018 COBBLESTONE REHABILITATION
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UNSECURED	Claimed:	\$1,325.00	Scheduled:	\$1,325.00
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MEDICAL IMAGING INC 5000 NW 27TH CT, STE B GAINSVILLE, FL 32606	Claim Number: 20280 Claim Date: 12/14/2021 Debtor: SF BREVARD, LLC
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UNSECURED	Claimed:	\$17,977.65
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GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

MEDICAL PARTS SOURCE INC 1850 PORTER LAKE DR, STE 101 SARASOTA, FL 34240	Claim Number: 20036 Claim Date: 11/17/2021 Debtor: GULF COAST HEALTH CARE, LLC Comments: POSSIBLY AMENDED BY 20272
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UNSECURED	Claimed:	\$32,851.42
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MEDICAL PARTS SOURCE INC 1850 PORTER LAKE DR, STE 101 SARASOTA, FL 34240	Claim Number: 20272 Claim Date: 12/14/2021 Debtor: FL HUD ROSEWOOD, LLC Comments: AMENDS CLAIM #20036
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UNSECURED	Claimed:	\$732.27
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MEDICAL PARTS SOURCE INC 1850 PORTER LAKE DR, STE 101 SARASOTA, FL 34240	Claim Number: 20273 Claim Date: 12/14/2021 Debtor: GULF COAST HEALTH CARE, LLC Comments: AMENDS CLAIM #20036
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UNSECURED	Claimed:	\$32,851.42
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MID FLORIDA HEMATOLOGY ONCOLOGY CENTERS 2776 ENTERPRISE RD, STE 100 ORANGE CITY, FL 32763	Claim Number: 20082 Claim Date: 12/02/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$5,967.64
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MID STATE FIRE EQUIPMENT INC 297 WASHINGTON BLVD NE LAKE PLACID, FL 33852	Claim Number: 20092 Claim Date: 12/06/2021 Debtor: SF LAKE PLACID ALF, LLC
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UNSECURED	Claimed:	\$0.00	UNDET	Scheduled:	\$319.28
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GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

MILLER ICE MACHINE COMPANY 319 TEGARDEN RD GULFPORT, MS 39507	Claim Number: 211 Claim Date: 12/13/2021 Debtor: MS HUD BOYINGTON, LLC
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UNSECURED	Claimed:	\$144.45	Scheduled:	\$144.45
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MILOT, JASON D/B/A AGORA AC SUPPLIES PO BOX 833 INTERLACHEN, FL 32148	Claim Number: 32 Claim Date: 11/05/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$14,466.05
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MILSAP, ZELLA MAE C/O PAULA BUTLER, POA ATTN SANGA TURNBULL 114 N TENNESSEE AVE, STE 201 LAKELAND, FL 33801	Claim Number: 20080 Claim Date: 12/01/2021 Debtor: GULF COAST HEALTH CARE, LLC Comments: POSSIBLY AMENDED BY 20088
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UNSECURED	Claimed:	\$0.00 UNDET
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MILSAP, ZELLA MAE PAULA BUTLER, POA C/O SANGA TURNBULL 114 N TENNESSEE AVE, STE 201 LAKELAND, FL 33801	Claim Number: 20088 Claim Date: 12/05/2021 Debtor: GULF COAST HEALTH CARE, LLC Comments: AMENDS THE CLAIM #20080
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UNSECURED	Claimed:	\$300,000.00 UNLIQ
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MISSISSIPPI DEPARTMENT OF REVENUE ATTN BANKRUPTCY SECTION PO BOX 22808 JACKSON, MS 39225-2808	Claim Number: 20031 Claim Date: 11/17/2021 Debtor: MS SINGING, LLC Comments: POSSIBLY AMENDED BY 20077
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PRIORITY	Claimed:	\$63.98
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

MISSISSIPPI DEPARTMENT OF REVENUE
ATTN BANKRUPTCY SECTION
PO BOX 22808
JACKSON, MS 39225-2808

Claim Number: 20032
Claim Date: 11/17/2021
Debtor: MS HUD OCEAN SPRINGS, LLC
Comments: POSSIBLY AMENDED BY 20078

PRIORITY Claimed: \$99.12

MISSISSIPPI DEPARTMENT OF REVENUE
ATTN BANKRUPTCY SECTION
PO BOX 22808
JACKSON, MS 39225-2808

Claim Number: 20034
Claim Date: 11/17/2021
Debtor: MS HUD DIXIE, LLC
Comments: POSSIBLY AMENDED BY 20076

PRIORITY Claimed: \$9.15

MISSISSIPPI DEPARTMENT OF REVENUE
ATTN BANKRUPTCY SECTION
PO BOX 22808
JACKSON, MS 39225-2808

Claim Number: 20035
Claim Date: 11/17/2021
Debtor: MS HUD BOYINGTON, LLC
Comments: POSSIBLY AMENDED BY 20079

PRIORITY Claimed: \$79.78

MISSISSIPPI DEPARTMENT OF REVENUE
ATTN BANKRUPTCY SECTION
PO BOX 22808
JACKSON, MS 39225-2808

Claim Number: 20076
Claim Date: 11/30/2021
Debtor: MS HUD DIXIE, LLC
Comments:
AMENDS CLAIM #20034

PRIORITY Claimed: \$0.00

MISSISSIPPI DEPARTMENT OF REVENUE
ATTN BANKRUPTCY SECTION
PO BOX 22808
JACKSON, MS 39225-2808

Claim Number: 20077
Claim Date: 11/30/2021
Debtor: MS SINGING, LLC
Comments:
AMENDS CLAIM #20031

PRIORITY Claimed: \$0.00

GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

MISSISSIPPI DEPARTMENT OF REVENUE
ATTN BANKRUPTCY SECTION
PO BOX 22808
JACKSON, MS 39225-2808

Claim Number: 20078
Claim Date: 11/30/2021
Debtor: MS HUD OCEAN SPRINGS, LLC
Comments:
AMENDS CLAIM #20032

PRIORITY Claimed: \$0.00

MISSISSIPPI DEPARTMENT OF REVENUE
ATTN BANKRUPTCY SECTION
PO BOX 22808
JACKSON, MS 39225-2808

Claim Number: 20079
Claim Date: 11/30/2021
Debtor: MS HUD BOYINGTON, LLC
Comments:
AMENDS CLAIM #20035

PRIORITY Claimed: \$0.00

MISSISSIPPI HEALTH CARE ASSOCIATION
303 BRAME RD
RIDGELAND, MS 39157

Claim Number: 295
Claim Date: 12/21/2021
Debtor: MS HUD BOYINGTON, LLC

UNSECURED Claimed: \$1,800.00 Scheduled: \$1,800.00

MISSISSIPPI HEALTH CARE ASSOCIATION
303 BRAME RD
RIDGELAND, MS 39157

Claim Number: 298
Claim Date: 12/21/2021
Debtor: MS HUD DIXIE, LLC

UNSECURED Claimed: \$600.00 Scheduled: \$600.00

MISSISSIPPI HEALTH CARE ASSOCIATION
303 BRAME RD
RIDGELAND, MS 39157

Claim Number: 299
Claim Date: 12/21/2021
Debtor: MS HUD OCEAN SPRINGS, LLC

UNSECURED Claimed: \$1,150.00 Scheduled: \$1,150.00

GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

MISSISSIPPI HEALTH CARE ASSOCIATION
303 BRAME RD
RIDGELAND, MS 39157

Claim Number: 300
Claim Date: 12/21/2021
Debtor: MS HUD PINE VIEW, LLC

UNSECURED	Claimed:	\$900.00	Scheduled:	\$900.00
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MISSISSIPPI HEALTH CARE ASSOCIATION
303 BRAME RD
RIDGELAND, MS 39157

Claim Number: 301
Claim Date: 12/21/2021
Debtor: MS LAKESIDE, LLC

UNSECURED	Claimed:	\$1,200.00	Scheduled:	\$1,200.00
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MISSISSIPPI HEALTH CARE ASSOCIATION
303 BRAME RD
RIDGELAND, MS 39157

Claim Number: 302
Claim Date: 12/21/2021
Debtor: MS SINGING, LLC

UNSECURED	Claimed:	\$1,600.00	Scheduled:	\$1,600.00
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MISSISSIPPI HEALTH CARE ASSOCIATION
303 BRAME RD
RIDGELAND, MS 39157

Claim Number: 303
Claim Date: 12/21/2021
Debtor: MS SHELBY, LLC

UNSECURED	Claimed:	\$600.00	Scheduled:	\$600.00
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MISSISSIPPI HEALTH CARE ASSOCIATION PAC
303 BRAME RD
RIDGELAND, MS 39157

Claim Number: 296
Claim Date: 12/21/2021
Debtor: MS LAKESIDE, LLC

UNSECURED	Claimed:	\$1,800.00	Scheduled:	\$1,800.00
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

MISSISSIPPI HEALTH CARE ASSOCIATION PAC
303 BRAME RD
RIDGELAND, MS 39157

Claim Number: 297
Claim Date: 12/21/2021
Debtor: MS HUD BOYINGTON, LLC

UNSECURED Claimed: \$2,700.00 Scheduled: \$2,700.00

MISSISSIPPI POWER COMPANY
16080 JIM BANKS RD
GULFPORT, MS 39503

Claim Number: 7
Claim Date: 10/20/2021
Debtor: MS HUD BOYINGTON, LLC

UNSECURED Claimed: \$6,734.59

MISSISSIPPI POWER COMPANY
16080 JIM BANKS RD
GULFPORT, MS 39503

Claim Number: 8
Claim Date: 10/20/2021
Debtor: MS HUD DIXIE, LLC

UNSECURED Claimed: \$4,883.68

MISSISSIPPI POWER COMPANY
16080 JIM BANKS RD
GULFPORT, MS 39503

Claim Number: 9
Claim Date: 10/20/2021
Debtor: MS HUD PINE VIEW, LLC

UNSECURED Claimed: \$6,060.69

MISSISSIPPI POWER COMPANY
16080 JIM BANKS RD
GULFPORT, MS 39503

Claim Number: 10
Claim Date: 10/20/2021
Debtor: MS SINGING, LLC

UNSECURED Claimed: \$4,418.75

GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

MITCHELL TECHNOLOGY SERVICES INC 919 N MARKET ST, STE 1410 WILMINGTON, DE 19801	Claim Number: 20002 Claim Date: 11/15/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$181,775.20
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MITCHELL, JAMES C/O MICHLES & BOOTH PA ATTN ADRIAN R BRIDGES 501 BRENT LN PENSACOLA, FL 32503	Claim Number: 20324 Claim Date: 12/22/2021 Debtor: NF PENSACOLA MANOR, LLC
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UNSECURED	Claimed:	\$1,000,000.00
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MITCHELL, JAMES C/O MICHLES & BOOTH PA ATTN ADRIAN R BRIDGES 501 BRENT LN PENSACOLA, FL 32503	Claim Number: 20328 Claim Date: 12/22/2021 Debtor: HUD FACILITIES, LLC
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UNSECURED	Claimed:	\$1,000,000.00
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MOBILE ONE NON-EMERGENCY TRANSPORT SERVICE LLC 5319 OLD HWY 42 HATTIESBURG, MS 39401	Claim Number: 50 Claim Date: 11/08/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$2,407.00	Scheduled:	\$2,047.00
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MOBILE ONE NON-EMERGENCY TRANSPORT SERVICE LLC 5319 OLD HWY 42 HATTIESBURG, MS 39401	Claim Number: 51 Claim Date: 11/08/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$1,445.00	Scheduled:	\$790.00
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

MOBILE ONE NON-EMERGENCY TRANSPORT
SERVICE LLC
5319 OLD HWY 42
HATTIESBURG, MS 39401

Claim Number: 52
Claim Date: 11/08/2021
Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED	Claimed:	\$1,406.00	Scheduled:	\$1,358.00
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MOBILE ONE NON-EMERGENCY TRANSPORT
SERVICE LLC
5319 OLD HWY 42
HATTIESBURG, MS 39401

Claim Number: 53
Claim Date: 11/08/2021
Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED	Claimed:	\$513.00	Scheduled:	\$513.00
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MOORE, KENDALL
C/O DAVID & RANDALL MOORE, PR
919 N MARKET ST, STE 1410
WILMINGTON, DE 19801

Claim Number: 20040
Claim Date: 11/18/2021
Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED	Claimed:	\$360,000.00
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MOORER, LUZELL
C/O STEPHANIE MOORER, PR
919 N MARKET ST, STE 1410
WILMINGTON, DE 19801

Claim Number: 20046
Claim Date: 11/18/2021
Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED	Claimed:	\$300,000.00
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MORRIS, JAMES M
7160 BRIGGS AVE
COCOA, FL 32927

Claim Number: 140
Claim Date: 12/02/2021
Debtor: GULF COAST HEALTH CARE, LLC

PRIORITY	Claimed:	\$0.00	UNDET
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

MR SIPPI BEVERAGES
PO BOX 16492
HATTIESBURG, MS 39404

Claim Number: 213
Claim Date: 12/13/2021
Debtor: MS HUD PINE VIEW, LLC

UNSECURED Claimed: \$23.12 Scheduled: \$23.12

NEUZIL, ROBERT
11158 61ST ST N
WEST PALM BEACH, FL 33412

Claim Number: 20063
Claim Date: 11/27/2021
Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED Claimed: \$0.00 UNDET

NOBLES GREENHOUSE INC
9248 129TH RD
LIVE OAK, FL 32060

Claim Number: 220
Claim Date: 12/13/2021
Debtor: NF SUWANNEE, LLC

UNSECURED Claimed: \$1,085.27 Scheduled: \$1,385.27

NORTH OKALOOSA MEDICAL CENTER
C/O PASI
PO BOX 188
BRENTWOOD, TN 37024

Claim Number: 18
Claim Date: 10/22/2021
Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED Claimed: \$3,019.10

NORTH SUNFLOWER MEDICAL CENTER
840 N OAK AVE
RULEVILLE, MS 38771-3227

Claim Number: 391
Claim Date: 12/29/2021
Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED Claimed: \$64,503.60

GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

NUTRITION SYSTEMS CONSULTING 404 LEGACY PARK, STE A RIDGELAND, MS 39157	Claim Number: 20281 Claim Date: 12/15/2021 Debtor: MS GREENBOUGH, LLC
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UNSECURED	Claimed:	\$9,849.92
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NUTRITION SYSTEMS CONSULTING 404 LEGACY PARK, STE A RIDGELAND, MS 39157	Claim Number: 20282 Claim Date: 12/15/2021 Debtor: MS SHELBY, LLC
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UNSECURED	Claimed:	\$13,603.86
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NUTTER, GLENNA C/O TERRI NUTTER, PR 919 N MARKET ST, STE 1410 WILMINGTON, DE 19801	Claim Number: 20041 Claim Date: 11/18/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$350,000.00
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OASIS TRANSPORTATION SERVICES 6827 N ORANGE BLOSSOM TRL, #6 ORLANDO, FL 32810	Claim Number: 150 Claim Date: 12/06/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$9,242.00
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OBERTANCE, LINDA 4237 HAZELHURST DR PACE, FL 32571	Claim Number: 151 Claim Date: 12/06/2021 Debtor: NF PENSACOLA MANOR, LLC
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PRIORITY	Claimed:	\$1,275.00
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

OKALOOSA COUNTY TAX COLLECTOR
ATTN SAMANTHA TERRELL
1250 N EGLIN PKWY, STE 101
SHALIMAR, FL 32579

Claim Number: 181
Claim Date: 12/07/2021
Debtor: FL HUD SILVERCREST, LLC
Comments:
Claim Out of Balance Claim out of balance

PRIORITY	Claimed:	\$2,836.81
SECURED	Claimed:	\$2,836.81
TOTAL	Claimed:	\$2,836.81

OSCEOLA COUNTY TAX COLLECTOR
PO BOX 422105
KISSIMMEE, FL 34742-2105

Claim Number: 21
Claim Date: 10/26/2021
Debtor: GULF COAST HEALTH CARE, LLC
Comments:
Claim Out of Balance Claim out of balance

PRIORITY	Claimed:	\$576.98
SECURED	Claimed:	\$576.98
TOTAL	Claimed:	\$576.98

OSCEOLA SUPPLY INC
915 COMMERCE BLVD
MIDWAY, FL 32343

Claim Number: 5
Claim Date: 10/14/2021
Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED	Claimed:	\$292,241.49
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OSCEOLA SUPPLY INC
C/O KASEN & KASEN
ATTN JENNY R KASEN
1000 N WEST ST, STE 1200
WILMINGTON, DE 19801

Claim Number: 30001
Claim Date: 12/01/2021
Debtor: GULF COAST HEALTH CARE, LLC
Comments: ALLOWED
DOCKET: 488 (12/01/2021)

ADMINISTRATIVE	Claimed:	\$76,817.31
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Allowed:	\$76,817.31
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OXFORD ORTHOPAEDICS AND SPORTS MEDICINE
497 AZALEA DR, STE 102
OXFORD, MS 38655

Claim Number: 20117
Claim Date: 12/08/2021
Debtor: MS GREENBOUGH, LLC

UNSECURED	Claimed:	\$94.00
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GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

PALAFOX COMPUTERS INC 111 N PALAFOX ST PENSACOLA, FL 32502	Claim Number: 20091 Claim Date: 12/06/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$277.36 UNLIQ	Scheduled:	\$106.43
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PALM BEACH COUNTY TAX COLLECTOR ATTN LEGAL SERVICES DEPARTMENT PO BOX 3715 WEST PALM BEACH, FL 33402-3715	Claim Number: 20268 Claim Date: 12/13/2021 Debtor: SF BOYNTON, LLC
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SECURED	Claimed:	\$7,291.39
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PENSACOLA HEALTH TRUST LLC C/O LOCKE LORD LLP ATTN DAVID L SWANSON 2800 ROSS AVE, STE 2200 DALLAS, TX 75201	Claim Number: 20334 Claim Date: 12/23/2021 Debtor: PENSACOLA ADMINISTRATIVE SERVICES, LLC
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SECURED	Claimed:	\$49,412,454.87 UNLIQ
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PENSACOLA HEALTH TRUST LLC C/O LOCKE LORD LLP ATTN DAVID L SWANSON 2800 ROSS AVE, STE 2200 DALLAS, TX 75201	Claim Number: 20337 Claim Date: 12/23/2021 Debtor: GULF COAST MASTER TENANT I, LLC
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SECURED	Claimed:	\$49,412,454.87 UNLIQ
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PENSACOLA HEALTH TRUST LLC C/O LOCKE LORD LLP ATTN DAVID L SWANSON 2800 ROSS AVE, STE 2200 DALLAS, TX 75201	Claim Number: 20340 Claim Date: 12/23/2021 Debtor: GULF COAST MASTER TENANT II, LLC
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SECURED	Claimed:	\$49,412,454.87 UNLIQ
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

PENSACOLA HEALTH TRUST LLC	Claim Number: 20343
C/O LOCKE LORD LLP	Claim Date: 12/23/2021
ATTN DAVID L SWANSON	Debtor: HUD FACILITIES, LLC
2800 ROSS AVE, STE 2200	
DALLAS, TX 75201	

SECURED	Claimed:	\$49,412,454.87 UNLIQ
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PENSACOLA HEALTH TRUST LLC	Claim Number: 20346
C/O LOCKE LORD LLP	Claim Date: 12/23/2021
ATTN DAVID L SWANSON	Debtor: HUD FACILITIES, LLC
2800 ROSS AVE, STE 2200	
DALLAS, TX 75201	

SECURED	Claimed:	\$49,412,454.87 UNLIQ
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PENSACOLA HEALTH TRUST LLC	Claim Number: 20349
C/O LOCKE LORD LLP	Claim Date: 12/23/2021
ATTN DAVID L SWANSON	Debtor: FLORIDA FACILITIES, LLC
2800 ROSS AVE, STE 2200	
DALLAS, TX 75201	

SECURED	Claimed:	\$49,412,454.87 UNLIQ
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PENSACOLA HEALTH TRUST LLC	Claim Number: 20352
C/O LOCKE LORD LLP	Claim Date: 12/23/2021
ATTN DAVID L SWANSON	Debtor: GULF COAST HEALTH CARE, LLC
2800 ROSS AVE, STE 2200	
DALLAS, TX 75201	

SECURED	Claimed:	\$49,412,454.87 UNLIQ
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PENSACOLA HEALTH TRUST LLC	Claim Number: 20355
C/O LOCKE LORD LLP	Claim Date: 12/23/2021
ATTN DAVID L SWANSON	Debtor: GCH MANAGEMENT SERVICES, LLC
2800 ROSS AVE, STE 2200	
DALLAS, TX 75201	

SECURED	Claimed:	\$49,412,454.87 UNLIQ
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GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

PENSACOLA HEALTH TRUST LLC C/O LOCKE LORD LLP ATTN DAVID L SWANSON 2800 ROSS AVE, STE 2200 DALLAS, TX 75201	Claim Number: 20358 Claim Date: 12/23/2021 Debtor: GULF COAST MASTER TENANT HOLDINGS, LLC
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SECURED	Claimed:	\$49,412,454.87 UNLIQ
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PERTESIS, LOUIS JAMES PERTESIS C/O LEISA PERTESIS, PR 919 N MARKET ST, STE 1410 WILMINGTON, DE 19801-3046	Claim Number: 20025 Claim Date: 11/16/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$75,000.00
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PETERS, KERRY L 8190 STONEBROOK DR APT C PENSACOLA, FL 32514	Claim Number: 20422 Claim Date: 12/31/2021 Debtor: NF ESCAMBIA, LLC Comments: Claim Out of Balance
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ADMINISTRATIVE	Claimed:	\$1,097.00
PRIORITY	Claimed:	\$1,097.00
TOTAL	Claimed:	\$1,097.00

PITTMAN, YVETTE PO BOX 30 MARIANNA, FL 32447	Claim Number: 266 Claim Date: 12/17/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$1,560.00
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POLNITZ, EVA MAY 919 N MARKET ST, STE 1410 WILMINGTON, DE 19801	Claim Number: 20086 Claim Date: 12/03/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$500,000.00
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

PORTABLE MEDICAL DIAGNOSTICS LLC
405 FONTAINE PL, STE 103
RIDGELAND, MS 39157

Claim Number: 62
Claim Date: 11/09/2021
Debtor: MS HUD BOYINGTON, LLC

UNSECURED Claimed: \$9,445.26

PORTABLE MEDICAL DIAGNOSTICS LLC
405 FONTAINE PL, STE 103
RIDGELAND, MS 39157

Claim Number: 63
Claim Date: 11/09/2021
Debtor: MS SINGING, LLC

UNSECURED Claimed: \$7,000.96

PORTABLE MEDICAL DIAGNOSTICS LLC
405 FONTAINE PL, STE 103
RIDGELAND, MS 39157

Claim Number: 64
Claim Date: 11/09/2021
Debtor: MS SHELBY, LLC

UNSECURED Claimed: \$2,359.72

PORTABLE MEDICAL DIAGNOSTICS LLC
405 FONTAINE PL, STE 103
RIDGELAND, MS 39157

Claim Number: 65
Claim Date: 11/09/2021
Debtor: MS HUD DIXIE, LLC

UNSECURED Claimed: \$4,111.40

PORTABLE MEDICAL DIAGNOSTICS LLC
405 FONTAINE PL, STE 103
RIDGELAND, MS 39157

Claim Number: 66
Claim Date: 11/09/2021
Debtor: MS HUD PINE VIEW, LLC

UNSECURED Claimed: \$907.54

GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

PORTABLE MEDICAL DIAGNOSTICS LLC
405 FONTAINE PL, STE 103
RIDGELAND, MS 39157

Claim Number: 67
Claim Date: 11/09/2021
Debtor: MS HUD OCEAN SPRINGS, LLC

UNSECURED Claimed: \$6,052.21

PORTABLE MEDICAL DIAGNOSTICS LLC
405 FONTAINE PL, STE 103
RIDGELAND, MS 39157

Claim Number: 68
Claim Date: 11/09/2021
Debtor: MS LAKESIDE, LLC

UNSECURED Claimed: \$8,723.64

PORTABLE MEDICAL DIAGNOSTICS LLC
405 FONTAINE PL, STE 103
RIDGELAND, MS 39157

Claim Number: 69
Claim Date: 11/09/2021
Debtor: MS GREENBOUGH, LLC

UNSECURED Claimed: \$2,508.40

PORTAL, CECILIA
C/O FFELISBERTO PORTAL, PR
919 N MARKET ST, STE 1410
WILMINGTON, DE 19801

Claim Number: 20044
Claim Date: 11/18/2021
Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED Claimed: \$250,000.00

POSITIVE MEDICAL TRANSPORT
201 COMMERCIAL CT
SEBRING, FL 33876

Claim Number: 288
Claim Date: 12/20/2021
Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED Claimed: \$102,216.58

GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

POWER SECURE SERVICE, INC. ATTN: GERALD A. JEUTTER/SMITH ANDERSON P.O. BOX 2611 RALEIGH, NC 27602-2611	Claim Number: 20426 Claim Date: 01/03/2022 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$214,566.57
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PREVATTE, ANDREW 3395 BLUEWATER DR PENSACOLA, FL 32503	Claim Number: 20116 Claim Date: 12/08/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$0.00 UNDET
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PROGRESSIVE MARINE LLC 8661 TUTWILER LN MOBILE, AL 36619	Claim Number: 370 Claim Date: 12/23/2021 Debtor: MS SINGING, LLC
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UNSECURED	Claimed:	\$2,484.69	Scheduled:	\$2,484.69
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PUCKETT, ANNE 226 N SAND PALM RD FREEPORT, FL 32439	Claim Number: 20301 Claim Date: 12/17/2021 Debtor: GULF COAST HEALTH CARE, LLC
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PRIORITY	Claimed:	\$9,950.00 UNLIQ
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R & R VENDING PO BOX 403 CANTONMENT, FL 32533	Claim Number: 20114 Claim Date: 12/08/2021 Debtor: NF PENSACOLA MANOR, LLC
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UNSECURED	Claimed:	\$1,768.37
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GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

RAINBOW WATER & COFFEE INC	Claim Number: 20314
3310 OLD MOBILE HWY	Claim Date: 12/21/2021
PASCAGOULA, MS 39581	Debtor: GULF COAST HEALTH CARE, LLC
	Comments: POSSIBLY AMENDED BY 20317

UNSECURED	Claimed:	\$700.05
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RAINBOW WATER & COFFEE INC	Claim Number: 20315
3310 OLD MOBILE HWY	Claim Date: 12/21/2021
PASCAGOULA, MS 39581	Debtor: GULF COAST HEALTH CARE, LLC
	Comments: POSSIBLY AMENDED BY 20316

UNSECURED	Claimed:	\$2,038.56
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RAINBOW WATER & COFFEE INC	Claim Number: 20316
3310 OLD MOBILE HWY	Claim Date: 12/21/2021
PASCAGOULA, MS 39581	Debtor: MS SINGING, LLC
	Comments:
	AMENDS CLAIM #20315

UNSECURED	Claimed:	\$2,038.56
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RAINBOW WATER & COFFEE INC	Claim Number: 20317
3310 OLD MOBILE HWY	Claim Date: 12/21/2021
PASCAGOULA, MS 39581	Debtor: MS HUD DIXIE, LLC
	Comments:
	AMENDS CLAIM #20314

UNSECURED	Claimed:	\$700.05
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RAINBOW WATER & COFFEE INC	Claim Number: 20318
3310 OLD MOBILE HWY	Claim Date: 12/21/2021
PASCAGOULA, MS 39581	Debtor: MS HUD BOYINGTON, LLC

UNSECURED	Claimed:	\$2,894.03
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

RAY, WILLIE 919 N MARKET ST, STE 1410 WILMINGTON, DE 19801	Claim Number: 20059 Claim Date: 11/23/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$250,000.00
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REAL TIME MEDICAL SYSTEMS LLC 785 ELKRIDGE LANDING RD, STE 300 LINTHICUM HEIGHTS, MD 21090	Claim Number: 20312 Claim Date: 12/20/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$35,756.36
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REILLY, ANDREW R MYRA D REILLY, NEXT FRIEND C/O COZEN O'CONNOR;THOMAS J FRANCELLA JR 1201 N MARKET ST, STE 1001 WILMINGTON, DE 19801	Claim Number: 201 Claim Date: 12/08/2021 Debtor: SF BOYNTON, LLC
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UNSECURED	Claimed:	\$350,000.00
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REIT SOLUTIONS II LLC C/O LOCKE LORD LLP ATTN DAVID L SWANSON 2800 ROSS AVE, STE 2200 DALLAS, TX 75201	Claim Number: 80 Claim Date: 11/15/2021 Debtor: GULF COAST MASTER TENANT I, LLC
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UNSECURED	Claimed:	\$180,000.00
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RELIABLE PRODUCTS LLC 755 MONROE RD, #471153 LAKE MONROE, FL 32747	Claim Number: 262 Claim Date: 12/16/2021 Debtor: NF PENSACOLA MANOR, LLC
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UNSECURED	Claimed:	\$2,099.06	Scheduled:	\$2,099.06
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GULF COAST HEALTH CARE, LLC
Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

RETINA SPECIALISTS OF MS PLLC 109 MILLSAPS DR, STE B HATTIESBURG, MS 39402	Claim Number: 20033 Claim Date: 11/17/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$6,374.80
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RF TECHNOLOGIES INC 3125 N 126TH ST BROOKFIELD, WI 53005	Claim Number: 206 Claim Date: 12/10/2021 Debtor: MF LAKE EUSTIS, LLC
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UNSECURED	Claimed:	\$987.30
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RF TECHNOLOGIES INC 3125 N 126TH ST BROOKFIELD, WI 53005	Claim Number: 207 Claim Date: 12/10/2021 Debtor: MS GREENBOUGH, LLC
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UNSECURED	Claimed:	\$432.90
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RF TECHNOLOGIES INC 3125 N 126TH ST BROOKFIELD, WI 53005	Claim Number: 208 Claim Date: 12/10/2021 Debtor: MF DEBARY, LLC
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UNSECURED	Claimed:	\$15,975.01
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RF TECHNOLOGIES INC 3125 N 126TH ST BROOKFIELD, WI 53005	Claim Number: 209 Claim Date: 12/10/2021 Debtor: MS SHELBY, LLC
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UNSECURED	Claimed:	\$98.97
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

RITENOUR, JOHN AND SUSAN C/O BEGGS & LANE RLLP ATTN J NIXON DANIEL III 501 COMMENDENCIA ST PENSACOLA, FL 32503	Claim Number: 374 Claim Date: 12/27/2021 Debtor: NF ESCAMBIA, LLC
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UNSECURED	Claimed:	\$4,000,000.00
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RITENOUR, JOHN AND SUSAN C/O BEGGS & LANE RLLP C/O J NIXON DANIEL III 501 COMMENDENCIA ST PENSACOLA, FL 32503	Claim Number: 375 Claim Date: 12/27/2021 Debtor: NF ESCAMBIA, LLC
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UNSECURED	Claimed:	\$4,000,000.00
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RITENOUR, JOHN AND SUSAN C/O BEGGS & LANE RLLP ATTN J NIXON DANIEL III, ESQ 501 COMMENDENCIA ST PENSACOLA, FL 32502	Claim Number: 20323 Claim Date: 12/22/2021 Debtor: NF ESCAMBIA, LLC
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UNSECURED	Claimed:	\$4,000,000.00 UNLIQ
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RJ YOUNG COMPANY LLC 730A FREELAND STATION RD NASHVILLE, TN 37228	Claim Number: 20377 Claim Date: 12/28/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$300,884.59
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ROSS, JOAN C/O CHRISTOPHER ROSS, PR 919 N MARKET ST, STE 1410 WILMINGTON, DE 19801	Claim Number: 20045 Claim Date: 11/18/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$275,000.00
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

ROSS, PAULA 321 ALPINE ST BIRMINGHAM, AL 35210	Claim Number: 20103 Claim Date: 12/07/2021 Debtor: FL HUD ROSEWOOD, LLC
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UNSECURED	Claimed:	\$3,521.50
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ROSTCHILD, KADIJAH 829 LATIMER RD GULFPORT, MS 39503	Claim Number: 20330 Claim Date: 12/22/2021 Debtor: GULF COAST HEALTH CARE, LLC
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PRIORITY	Claimed:	\$3,149.58
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ROVNER, ARLENE 118 MEADOWLARK DR ROYAL PALM BEACH, FL 33411	Claim Number: 388 Claim Date: 12/28/2021 Debtor: GULF COAST HEALTH CARE, LLC
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ADMINISTRATIVE	Claimed:	\$0.00	UNDET
PRIORITY	Claimed:	\$0.00	UNDET
SECURED	Claimed:	\$0.00	UNDET

RUTLAND LOW VOLTAGE SYSTEMS INC 1557 COMMERCE DR VALDOSTA, GA 31601	Claim Number: 20113 Claim Date: 12/08/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$904.30
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SANDERS, EDWARD C/O MICHLES & BOOTH 501 BRENT LN PENSACOLA, FL 32503	Claim Number: 289 Claim Date: 12/20/2021 Debtor: FL HUD ROSEWOOD, LLC
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UNSECURED	Claimed:	\$675,000.00
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

SANDERS, EDWARD C/O MICHLES & BOTTH PA ATTN KELLY D MURPHY, ESQ 501 BRENT LN PENSACOLA, FL 32503	Claim Number: 20302 Claim Date: 12/17/2021 Debtor: FL HUD ROSEWOOD, LLC
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UNSECURED	Claimed:	\$675,000.00	UNLIQ
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SANDESTIN OWNERS ASSOCIATION 215 GRAND BLVD, STE 101 SANDESTIN, FL 32550	Claim Number: 20287 Claim Date: 12/15/2021 Debtor: FL HUD DESTIN, LLC
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UNSECURED	Claimed:	\$3,609.60
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SANTA ROSA COUNTY TAX COLLECTOR 6495 CAROLINE ST, STE E MILTON, FL 32570	Claim Number: 210 Claim Date: 12/13/2021 Debtor: FL HUD BAYBREEZE, LLC
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SECURED	Claimed:	\$3,092.68
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SARTIN'S DISC DRUGS INC 4300 15TH ST, STE #1 GULFPORT, MS 39501	Claim Number: 230 Claim Date: 12/13/2021 Debtor: MS HUD BOYINGTON, LLC
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UNSECURED	Claimed:	\$614.96	Scheduled:	\$979.13
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SARTIN'S VITAL CARE INC 1311 BROAD AVE GULFPORT, MS 39501	Claim Number: 231 Claim Date: 12/13/2021 Debtor: MS HUD BOYINGTON, LLC
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UNSECURED	Claimed:	\$349.30
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GULF COAST HEALTH CARE, LLC
Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

SCHOLZ, EDWARD PAUL C/O MICHLES & BOOTH PA ATTN CHRISTOPHER P JANES 501 BRENT LN PENSACOLA, FL 32503	Claim Number: 20329 Claim Date: 12/22/2021 Debtor: NF PENSACOLA MANOR, LLC
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UNSECURED	Claimed:	\$1,000,000.00
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SCHUBERT, BARBARA 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20228 Claim Date: 12/11/2021 Debtor: SF BOYNTON, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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SCHUBERT, BARBARA 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20229 Claim Date: 12/11/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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SCHUBERT, BARBARA 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20230 Claim Date: 12/11/2021 Debtor: FLORIDA FACILITIES, LLC
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UNSECURED	Claimed:	\$1,000,000.00
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SCHUBERT, BARBARA 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20231 Claim Date: 12/11/2021 Debtor: GCH MANAGEMENT SERVICES, LLC
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UNSECURED	Claimed:	\$1,000,000.00
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GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

SCHUBERT, BARBARA 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20232 Claim Date: 12/11/2021 Debtor: PENSACOLA ADMINISTRATIVE SERVICES, LLC
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UNSECURED	Claimed:	\$1,000,000.00
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SEALS, PATRICIA ROBIN BASTIN, AS POA C/O COZEN O'CONNOR;THOMAS J FRANCELLA JR 1201 N MARKET ST, STE 1001 WILMINGTON, DE 19801	Claim Number: 182 Claim Date: 12/08/2021 Debtor: SF KISSIMMEE, LLC
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UNSECURED	Claimed:	\$350,000.00
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SEALS, PATRICIA ROBIN BASTIN, AS POA C/O COZEN O'CONNOR;THOMAS J FRANCELLA JR 1201 N MARKET ST, STE 1001 WILMINGTON, DE 19801	Claim Number: 183 Claim Date: 12/08/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$350,000.00
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SELF, ROBERT C/O BEGGS & LANE ATTN J NIXON DANIEL III 501 COMMENDENCIA ST PENSACOLA, FL 32502	Claim Number: 20319 Claim Date: 12/21/2021 Debtor: FL HUD DESTIN, LLC
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UNSECURED	Claimed:	\$750,000.00 UNLIQ
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SHIVE, KAREN A 319 TIMBER WIND DR DEFUNIAK SPRINGS, FL 32433	Claim Number: 214 Claim Date: 12/13/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$0.00 UNDET
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

SIEMENS INDUSTRY INC
4800 N POINT PKWY
ALPHARETTA, GA 30022

Claim Number: 20325
Claim Date: 12/22/2021
Debtor: NF NINE MILE, LLC

UNSECURED	Claimed:	\$885.00	Scheduled:	\$885.00
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SIEMENS INDUSTRY INC
ATTN STEPHANIE MITCHELL
4800 N POINT PKWY
ALPHARETTA, GA 30022

Claim Number: 20327
Claim Date: 12/22/2021
Debtor: NF ESCAMBIA, LLC

UNSECURED	Claimed:	\$3,657.42	Scheduled:	\$3,657.42
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SJB NO 2 LLC
C/O LOCKE LORD LLP
ATTN DAVID L SWANSON
2800 ROSS AVE, STE 2200
DALLAS, TX 75201

Claim Number: 81
Claim Date: 11/15/2021
Debtor: GULF COAST MASTER TENANT I, LLC

UNSECURED	Claimed:	\$180,000.00
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SMART, HENRY
C/O BLAIR N MENDES
4401 W KENNEDY BLVD, STE 250
TAMPA, FL 33609

Claim Number: 20233
Claim Date: 12/11/2021
Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED	Claimed:	\$20,000,000.00
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SMART, HENRY
C/O BLAIR N MENDES
4401 W KENNEDY BLVD, STE 250
TAMPA, FL 33609

Claim Number: 20234
Claim Date: 12/11/2021
Debtor: SF BREVARD, LLC

UNSECURED	Claimed:	\$10,000,000.00
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GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

SMART, HENRY C/O BLAIR N MENDES 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20235 Claim Date: 12/11/2021 Debtor: NF SUWANNEE, LLC
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UNSECURED	Claimed:	\$10,000,000.00
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SMART, HENRY 4401 W KENNEDY BLVD, STE 250 TAMPA, FL 33609	Claim Number: 20236 Claim Date: 12/11/2021 Debtor: HUD FACILITIES, LLC
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UNSECURED	Claimed:	\$1,000,000.00
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SMITH BROTHERS LAWN SERVICE CORP 10094 CR 49 LIVE OAK, FL 32060	Claim Number: 145 Claim Date: 12/03/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$7,020.00
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SOMERS, DEBRA J 265 S VIRGINIA AVE DELAND, FL 32724	Claim Number: 267 Claim Date: 12/17/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$0.00 UNDET
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SOUTH WALTON UTILITY COMPANY INC 369 MIRAMAR BEACH DR MIRAMAR BEACH, FL 32550	Claim Number: 387 Claim Date: 12/28/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$1,296.17
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SOUTHEASTERN BIOCOMMUNICATION ASSOC LLC
1678 MONTGOMERY WHY, STE 104, PMB 180
HOOVER, AL 35216

Claim Number: 377
Claim Date: 12/27/2021
Debtor: MS HUD PINE VIEW, LLC

UNSECURED

Claimed:

\$875.00

Scheduled:

\$875.00

SOUTHEASTERN BIOCOMMUNICATIONS ASSOC LLC
1678 MONTGOMERY HWY, STE 104, PMB 180
HOOVER, AL 35216

Claim Number: 378
Claim Date: 12/27/2021
Debtor: MS LAKESIDE, LLC

UNSECURED

Claimed:

\$1,500.00

Scheduled:

\$750.00

SOUTHEASTERN LAUNDRY EQUIPMENT SALES
1105 SHANA CT, STE 1
MARIETTA, GA 30066

Claim Number: 20123
Claim Date: 12/10/2021
Debtor: SF CARNEGIE, LLC

UNSECURED

Claimed:

\$432.79

SOUTHEASTERN LAUNDRY EQUIPMENT SALES
1105 SHANA CT, STE I
MARIETTA, GA 30066

Claim Number: 20438
Claim Date: 01/03/2022
Debtor: BREVARD OAKS CENTER, LLC

UNSECURED

Claimed:

\$669.48

SOUTHEASTERN LAUNDRY EQUIPMENT SALES
1105 SHANA CT, STE I
MARIETTA, GA 30066

Claim Number: 20439
Claim Date: 01/03/2022
Debtor: MF FLAGLER, LLC

UNSECURED

Claimed:

\$160.66

SOUTHEASTERN LAUNDRY EQUIPMENT SALES 1105 SHANA CT, STE I MARIETTA, GA 30066	Claim Number: 20440 Claim Date: 01/03/2022 Debtor: MF HALIFAX, LLC
UNSECURED	Claimed: \$196.93
SOUTHEASTERN LAUNDRY EQUIPMENT SALES 1105 SHANA CT, STE I MARIETTA, GA 30066	Claim Number: 20441 Claim Date: 01/03/2022 Debtor: MF LAKE EUSTIS, LLC
UNSECURED	Claimed: \$604.17
SOUTHEASTERN LAUNDRY EQUIPMENT SALES 1105 SHANA CT, STE I MARIETTA, GA 30066	Claim Number: 20442 Claim Date: 01/03/2022 Debtor: MF DEBARY, LLC
UNSECURED	Claimed: \$344.47
SOUTHEASTERN LAUNDRY EQUIPMENT SALES 1105 SHANA CT, STE I MARIETTA, GA 30066	Claim Number: 20443 Claim Date: 01/03/2022 Debtor: SF BREVARD, LLC
UNSECURED	Claimed: \$277.00
SPENCE, CINDY 1427 E EVANS, APT A PUEBLO, CO 81004	Claim Number: 217 Claim Date: 12/13/2021 Debtor: GULF COAST HEALTH CARE, LLC
UNSECURED	Claimed: \$0.00 UNDET

GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

SPENCE, MARY C/O ROBIN MCCALL, POA 919 N MARKET ST, STE 1410 WILMINGTON, DE 19801-3046	Claim Number: 20021 Claim Date: 11/15/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$250,000.00
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SPEZIALE, KAREN ATTN: JEFFREY S. HAMMER JILL S. SCHWARTZ & ASSOCIATES, P.A. 655 W. MORSE BLVD, STE 212 WINTER PARK, FL 32789	Claim Number: 20433 Claim Date: 01/03/2022 Debtor: NF MANOR, LLC
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UNSECURED	Claimed:	\$290,000.00	UNLIQ
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STAPLES INC ATTN TOM RIGGLEMAN 7 TECHNOLOGY CIR COLUMBIA, SC 29203	Claim Number: 4 Claim Date: 10/27/2021 Debtor: GULF COAST HEALTH CARE, LLC
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ADMINISTRATIVE	Claimed:	\$690.14
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UNSECURED	Claimed:	\$114,849.97
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STAR SHINE INC D/B/A TOMMYS AUTO GLASS 2480 HWY 71 MARIANNA, FL 32448	Claim Number: 218 Claim Date: 12/13/2021 Debtor: NF CHIPOLA, LLC
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UNSECURED	Claimed:	\$3,160.31	Scheduled:	\$3,460.31
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STELLAR SERVICES OF NORTH FLORIDA LLC PO BOX 5909 GAINESVILLE, FL 32627	Claim Number: 141 Claim Date: 12/02/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$247.50
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STELLAR TRANSPORT INC 211 W HIBISCUS BLVD, #238 MELBOURNE, FL 32901	Claim Number: 2 Claim Date: 10/25/2021 Debtor: SF CARNEGIE, LLC
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PRIORITY	Claimed:	\$6,463.46	Scheduled:	\$7,061.55
UNSECURED				

STELLAR TRANSPORT INC 211 W HIBISCUS BLVD, #238 MELBOURNE, FL 32901	Claim Number: 3 Claim Date: 10/25/2021 Debtor: BREVARD OAKS CENTER, LLC
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PRIORITY	Claimed:	\$49,711.51	Scheduled:	\$38,916.12
UNSECURED				

SUWANNEE COUNTY TAX COLLECTOR ATTN SHARON W JORDAN, TAX COLLECTOR 215 PINE AVE SW, STE A LIVE OAK, FL 32064	Claim Number: 215 Claim Date: 12/13/2021 Debtor: GULF COAST HEALTH CARE, LLC
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PRIORITY		Scheduled:	\$0.00 UNLIQ
SECURED	Claimed:	\$15,217.00	

TAMMY MOLONEY OBO MICHAEL MOLONEY C/O PAUL & PERKINS PA ATTN JASON A PAUL, ESQ 711 N ORLANDO AVE, STE 202 MAITLAND, FL 32751	Claim Number: 20285 Claim Date: 12/15/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$2,000,000.00 UNLIQ
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TAYLOR, SHARON C/O ZIMMERMAN & FRACHTMAN ATTN JOSHUA FRACHTMAN 6991 N STATE RD 7, 2ND FL PARKLAND, FL 33073	Claim Number: 20122 Claim Date: 12/09/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$2,500.00	Scheduled:	\$2,500.00
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

TD LAWNCARE
401 MCCOY RD
SEBRING, FL 33875

Claim Number: 20083
Claim Date: 12/02/2021
Debtor: SF LAKE PLACID ALF, LLC

UNSECURED Claimed: \$1,350.00

TERRACUSO, JOSE
C/O COZEN O'CONNOR
ATTN THOMAS J FRANCELLA JR
1201 N MARKET ST, 1001
WILMINGTON, DE 19801

Claim Number: 199
Claim Date: 12/08/2021
Debtor: SF ROYAL MANOR, LLC

UNSECURED Claimed: \$350,000.00

THERAPY EQUIPMENT TECHNICAL SERVICES INC
605 SE 12TH AVE
DEERFIELD BEACH, FL 33441

Claim Number: 143
Claim Date: 11/29/2021
Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED Claimed: \$6,653.00

THERAPY EQUIPMENT TECHNICAL SERVICES INC
605 SE 12TH AVE
DEERFIELD BEACH, FL 33441

Claim Number: 261
Claim Date: 12/16/2021
Debtor: FL HUD MARGATE, LLC

UNSECURED Claimed: \$1,961.00 Scheduled: \$1,961.00

THOMAS, DAVID L
36821 MERIDIAN CIR
GRAND ISLAND, FL 32735

Claim Number: 138
Claim Date: 11/30/2021
Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED Claimed: \$4,165.00

GULF COAST HEALTH CARE, LLC
Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

THOMAS, HATTIE M 124 BIG BEN DR DAYTON BEACH, FL 32117	Claim Number: 371 Claim Date: 12/23/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$0.00 UNDET
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THOMPSON ELECTRIC CO 887 GA HWY 133 S MOULTRIE, GA 31788	Claim Number: 20271 Claim Date: 12/14/2021 Debtor: SC-GA2018 COBBLESTONE REHABILITATION
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UNSECURED	Claimed:	\$1,475.00
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TLT TRANSPORT LLC 8746 ROCK CREEK RD MILTON, FL 32571	Claim Number: 76 Claim Date: 11/15/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$13,327.48
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TLT TRANSPORT LLC 8746 ROCK CREEK RD PACE, FL 32571	Claim Number: 20261 Claim Date: 12/11/2021 Debtor: NF PENSACOLA MANOR, LLC
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UNSECURED	Claimed:	\$530.00
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TLT TRANSPORT LLC 8746 ROCK CREEK RD PACE, FL 32571	Claim Number: 20262 Claim Date: 12/11/2021 Debtor: NF NINE MILE, LLC
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UNSECURED	Claimed:	\$2,818.26
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TLT TRANSPORT LLC 8746 ROCK CREEK RD PACE, FL 32571		Claim Number: 20263 Claim Date: 12/11/2021 Debtor: NF ESCAMBIA, LLC
UNSECURED	Claimed:	\$5,569.63
TLT TRANSPORT LLC 8746 ROCK CREEK RD PACE, FL 32571		Claim Number: 20264 Claim Date: 12/11/2021 Debtor: FL HUD BAYSIDE, LLC
UNSECURED	Claimed:	\$311.00
TLT TRANSPORT LLC 8746 ROCK CREEK RD PACE, FL 32571		Claim Number: 20265 Claim Date: 12/11/2021 Debtor: FL HUD PENSACOLA, LLC
UNSECURED	Claimed:	\$960.00
TLT TRANSPORT LLC 8746 ROCK CREEK RD PACE, FL 32571		Claim Number: 20266 Claim Date: 12/11/2021 Debtor: FL HUD BAYBREEZE, LLC
UNSECURED	Claimed:	\$397.90
TLT TRANSPORT LLC 8746 ROCK CREEK RD PACE, FL 32571		Claim Number: 20267 Claim Date: 12/11/2021 Debtor: FL HUD ROSEWOOD, LLC
UNSECURED	Claimed:	\$2,740.69

GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

TOLBERT, VIRGINIA ANN C/O WILKES & ASSOCIATES PA ONE N DALE MABRY, STE 800 TAMPA, FL 33609	Claim Number: 20128 Claim Date: 12/10/2021 Debtor: NF ESCAMBIA, LLC
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UNSECURED	Claimed: \$10,000,000.00
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TOLBERT, VIRGINIA ANN C/O WILKES & ASSOCIATES PA ONE N DALE MABRY, STE 800 TAMPA, FL 33609	Claim Number: 20129 Claim Date: 12/10/2021 Debtor: HUD FACILITIES, LLC
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UNSECURED	Claimed: \$10,000,000.00
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TOLBERT, VIRGINIA ANN C/O WILKES & ASSOCIATES PA ONE N DALE MABRY, STE 800 TAMPA, FL 33609	Claim Number: 20130 Claim Date: 12/10/2021 Debtor: PENSACOLA ADMINISTRATIVE SERVICES, LLC
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UNSECURED	Claimed: \$10,000,000.00
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TOLBERT, VIRGINIA ANN C/O WILKES & ASSOCIATES PA ONE N DALE MABRY, STE 800 TAMPA, FL 33609	Claim Number: 20131 Claim Date: 12/10/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed: \$10,000,000.00
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TRIPLETT, MATTHEW THOMAS 1249 AINSWORTH DR GULF BREEZE, FL 32563	Claim Number: 20022 Claim Date: 11/15/2021 Debtor: GULF COAST HEALTH CARE, LLC
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PRIORITY	Claimed: \$56,500.00
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

UNITEDHEALTHCARE INSURANCE COMPANY
ATTN CDM/BANKRUPTCY
185 ASYLUM ST, #03B
HARTFORD, CT 06103

Claim Number: 20
Claim Date: 10/25/2021
Debtor: BREVARD OAKS CENTER, LLC

UNSECURED Claimed: \$2,808.40

UNITEDHEALTHCARE INSURANCE COMPANY
ATTN CDM/BANKRUPTCY
185 ASYLUM ST, #03B
HARTFORD, CT 06103

Claim Number: 22
Claim Date: 10/26/2021
Debtor: FL HUD BAYBREEZE, LLC

UNSECURED Claimed: \$6,210.01

UNITEDHEALTHCARE INSURANCE COMPANY
ATTN CDM/BANKRUPTCY
185 ASYLUM ST, #03B
HARTFORD, CT 06103

Claim Number: 23
Claim Date: 10/26/2021
Debtor: FL HUD BAYSIDE, LLC

UNSECURED Claimed: \$293.26

UNITEDHEALTHCARE INSURANCE COMPANY
ATTN CDM/BANKRUPTCY
185 ASYLUM ST, #03B
HARTFORD, CT 06103

Claim Number: 24
Claim Date: 10/26/2021
Debtor: FL HUD MARGATE, LLC

UNSECURED Claimed: \$13,200.00

UNITEDHEALTHCARE INSURANCE COMPANY
ATTN CDM/BANKRUPTCY
185 ASYLUM ST, 03B
HARTFORD, CT 06103

Claim Number: 33
Claim Date: 10/29/2021
Debtor: MF FLAGLER, LLC

UNSECURED Claimed: \$9,900.00

GULF COAST HEALTH CARE, LLC
Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

UNITEDHEALTHCARE INSURANCE COMPANY ATTN CDM/BANKRUPTCY 185 ASYLUM ST, 03B HARTFORD, CT 06103	Claim Number: 34 Claim Date: 10/29/2021 Debtor: FL HUD PENSACOLA, LLC
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UNSECURED	Claimed:	\$750.46
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UNITEDHEALTHCARE INSURANCE COMPANY ATTN CDM/BANKRUPTCY 185 ASYLUM ST, 03B HARTFORD, CT 06103	Claim Number: 35 Claim Date: 10/29/2021 Debtor: FL HUD SILVERCREST, LLC
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UNSECURED	Claimed:	\$3,639.04
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UNITEDHEALTHCARE INSURANCE COMPANY ATTN CDM/BANKRUPTCY 185 ASYLUM ST, 03B HARTFORD, CT 06103	Claim Number: 36 Claim Date: 10/29/2021 Debtor: MF DEBARY, LLC
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UNSECURED	Claimed:	\$3,480.11
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UNITEDHEALTHCARE INSURANCE COMPANY ATTN CDM/BANKRUPTCY 185 ASYLUM ST, 03B HARTFORD, CT 06103	Claim Number: 83 Claim Date: 11/09/2021 Debtor: MF LAKE EUSTIS, LLC
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UNSECURED	Claimed:	\$831.68
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UNITEDHEALTHCARE INSURANCE COMPANY ATTN CDM/BANKRUPTCY 185 ASYLUM ST, 03B HARTFORD, CT 06103	Claim Number: 84 Claim Date: 11/09/2021 Debtor: MF LONGWOOD, LLC
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UNSECURED	Claimed:	\$51,509.72
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

UNITEDHEALTHCARE INSURANCE COMPANY
ATTN CDM/BANKRUPTCY
185 ASYLUM ST, 03B
HARTFORD, CT 06103

Claim Number: 85
Claim Date: 11/09/2021
Debtor: MF OAKWOOD, LLC

UNSECURED Claimed: \$12,995.83

UNITEDHEALTHCARE INSURANCE COMPANY
ATTN CDM/BANKRUPTCY
185 ASYLUM ST, 03B
HARTFORD, CT 06103

Claim Number: 86
Claim Date: 11/09/2021
Debtor: MF HALIFAX, LLC

UNSECURED Claimed: \$721.70

UNITEDHEALTHCARE INSURANCE COMPANY
ATTN CDM/BANKRUPTCY
185 ASYLUM ST, 03B
HARTFORD, CT 06103

Claim Number: 87
Claim Date: 11/09/2021
Debtor: MS HUD DIXIE, LLC

UNSECURED Claimed: \$5,320.03

UNITEDHEALTHCARE INSURANCE COMPANY
ATTN CDM/BANKRUPTCY
185 ASYLUM ST - 03B
HARTFORD, CT 06103

Claim Number: 119
Claim Date: 11/11/2021
Debtor: NF BRYNWOOD, LLC

UNSECURED Claimed: \$6,695.69

UNITEDHEALTHCARE INSURANCE COMPANY
ATTN CDM/BANKRUPTCY
185 ASYLUM ST - 03B
HARTFORD, CT 06103

Claim Number: 120
Claim Date: 11/11/2021
Debtor: NF CHIPOLA, LLC

UNSECURED Claimed: \$735.59

GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

UNITEDHEALTHCARE INSURANCE COMPANY
ATTN CDM/BANKRUPTCY
185 ASYLUM ST - 03B
HARTFORD, CT 06103

Claim Number: 121
Claim Date: 11/11/2021
Debtor: NF ESCAMBIA, LLC

UNSECURED Claimed: \$16,190.75

UNITEDHEALTHCARE INSURANCE COMPANY
ATTN CDM/BANKRUPTCY
185 ASYLUM ST - 03B
HARTFORD, CT 06103

Claim Number: 122
Claim Date: 11/11/2021
Debtor: NF GLEN COVE, LLC

UNSECURED Claimed: \$1,321.89

UNITEDHEALTHCARE INSURANCE COMPANY
ATTN CDM/BANKRUPTCY
185 ASYLUM ST, 03B
HARTFORD, CT 06103

Claim Number: 158
Claim Date: 12/02/2021
Debtor: NF MANOR, LLC

UNSECURED Claimed: \$8,337.54

UNITEDHEALTHCARE INSURANCE COMPANY
ATTN CDM/BANKRUPTCY
185 ASYLUM ST, 03B
HARTFORD, CT 06103

Claim Number: 159
Claim Date: 12/02/2021
Debtor: NF PANAMA, LLC

UNSECURED Claimed: \$50,644.56

UNITEDHEALTHCARE INSURANCE COMPANY
ATTN CDM/BANKRUPTCY
185 ASYLUM ST, #03B
HARTFORD, CT 06103

Claim Number: 268
Claim Date: 12/07/2021
Debtor: NF PENSACOLA MANOR, LLC

UNSECURED Claimed: \$2,717.61

GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

UNITEDHEALTHCARE INSURANCE COMPANY ATTN CDM/BANKRUPTCY 185 ASYLUM ST, #03B HARTFORD, CT 06103	Claim Number: 269 Claim Date: 12/07/2021 Debtor: NF RIVER CHASE, LLC
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UNSECURED	Claimed:	\$4,119.77
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UNITEDHEALTHCARE INSURANCE COMPANY ATTN CDM/BANKRUPTCY 185 ASYLUM ST, #03B HARTFORD, CT 06103	Claim Number: 270 Claim Date: 12/07/2021 Debtor: NF SUWANNEE, LLC
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UNSECURED	Claimed:	\$10,426.37
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UNITEDHEALTHCARE INSURANCE COMPANY ATTN CDM/BANKRUPTCY 185 ASYLUM ST, #03B HARTFORD, CT 06103	Claim Number: 271 Claim Date: 12/07/2021 Debtor: NF WINDSOR, LLC
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UNSECURED	Claimed:	\$14,387.18
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UNITEDHEALTHCARE INSURANCE COMPANY ATTN CDM/BANKRUPTCY 185 ASYLUM ST, #03B HARTFORD, CT 06103	Claim Number: 272 Claim Date: 12/07/2021 Debtor: SF BOYNTON, LLC
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UNSECURED	Claimed:	\$19,868.06
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UNITEDHEALTHCARE INSURANCE COMPANY ATTN CDM/BANKRUPTCY 185 ASYLUM ST, #03B HARTFORD, CT 06103	Claim Number: 273 Claim Date: 12/15/2021 Debtor: SF BREVARD, LLC
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UNSECURED	Claimed:	\$3,020.13
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

UNITEDHEALTHCARE INSURANCE COMPANY
ATTN CDM/BANKRUPTCY
185 ASYLUM ST, #03B
HARTFORD, CT 06103

Claim Number: 274
Claim Date: 12/15/2021
Debtor: SF GLEN OAKS, LLC

UNSECURED Claimed: \$47,328.38

UNITEDHEALTHCARE INSURANCE COMPANY
ATTN CDM/BANKRUPTCY
185 ASYLUM ST, #03B
HARTFORD, CT 06103

Claim Number: 275
Claim Date: 12/15/2021
Debtor: SF KISSIMMEE, LLC

UNSECURED Claimed: \$7,812.59

UNITEDHEALTHCARE INSURANCE COMPANY
ATTN CDM/BANKRUPTCY
185 ASYLUM ST, #03B
HARTFORD, CT 06103

Claim Number: 276
Claim Date: 12/15/2021
Debtor: SF LAKE PLACID, LLC

UNSECURED Claimed: \$46,990.88

UNITEDHEALTHCARE INSURANCE COMPANY
ATTN CDM/BANKRUPTCY
185 ASYLUM ST, #03B
HARTFORD, CT 06103

Claim Number: 277
Claim Date: 12/15/2021
Debtor: SF OAKBROOK, LLC

UNSECURED Claimed: \$3,404.00

UNITEDHEALTHCARE INSURANCE COMPANY
ATTN CDM/BANKRUPTCY
185 ASYLUM ST, #03B
HARTFORD, CT 06103

Claim Number: 278
Claim Date: 12/15/2021
Debtor: SF ROYAL MANOR, LLC

UNSECURED Claimed: \$36,789.98

GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

UNITEDHEALTHCARE INSURANCE COMPANY
 ATTN CDM/BANKRUPTCY
 185 ASYLUM ST, #03B
 HARTFORD, CT 06103

Claim Number: 279
 Claim Date: 12/15/2021
 Debtor: SF SALERNO, LLC

UNSECURED Claimed: \$6,903.41

VAZQUEZ, MIRNA
 4401 W KENNEDY BLVD, STE 250
 TAMPA, FL 33609

Claim Number: 20250
 Claim Date: 12/11/2021
 Debtor: SC-GA2018 COBBLESTONE REHABILITATION

UNSECURED Claimed: \$10,000,000.00

VAZQUEZ, MIRNA
 4401 W KENNEDY BLVD, STE 250
 TAMPA, FL 33609

Claim Number: 20251
 Claim Date: 12/11/2021
 Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED Claimed: \$10,000,000.00

VAZQUEZ, MIRNA
 4401 W KENNEDY BLVD, STE 250
 TAMPA, FL 33609

Claim Number: 20252
 Claim Date: 12/11/2021
 Debtor: HUD FACILITIES, LLC

UNSECURED Claimed: \$1,000,000.00

VAZQUEZ, MIRNA
 4401 W KENNEDY BLVD, STE 250
 TAMPA, FL 33609

Claim Number: 20253
 Claim Date: 12/11/2021
 Debtor: GCH MANAGEMENT SERVICES, LLC

UNSECURED Claimed: \$1,000,000.00

GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

VOIGT, GLENN	Claim Number: 186
ROBIN VOIGT, AS POA	Claim Date: 12/08/2021
C/O COZEN O'CONNOR;THOMAS J FRANCELLA JR	Debtor: FL HUD DESTIN, LLC
1201 N MARKET ST, STE 1001	
WILMINGTON, DE 19801	

UNSECURED	Claimed:	\$175,000.00
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VOIGT, GLENN	Claim Number: 187
ROBIN VOIGT, AS POA	Claim Date: 12/08/2021
C/O COZEN O'CONNOR;THOMAS J FRANCELLA JR	Debtor: GULF COAST HEALTH CARE, LLC
1201 N MARKET ST, STE 1001	
WILMINGTON, DE 19801	

UNSECURED	Claimed:	\$175,000.00
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VOIGT, GLENN	Claim Number: 20303
109 BAYWIND DR	Claim Date: 12/19/2021
NICEVILLE, FL 32578	Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED	Claimed:	\$175,000.00
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WALLER, GEORGE	Claim Number: 20011
C/O WENDY WALLER, PR	Claim Date: 11/15/2021
919 N MARKET ST, STE 1410	Debtor: GULF COAST HEALTH CARE, LLC
WILMINGTON, DE 19801-3046	

UNSECURED	Claimed:	\$400,000.00
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WARD, KEITH	Claim Number: 20016
C/O KEVIN KOSTELNIK, ESQ	Claim Date: 11/15/2021
411 N CALHOUN ST	Debtor: NF BRYNWOOD, LLC
TALLAHASSEE, FL 32301	

UNSECURED	Claimed:	\$250,000.00 UNLIQ
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GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

WASHINGTON, LORI 9000 WARBLER AVE OCEAN SPRINGS, MS 39564	Claim Number: 137 Claim Date: 11/30/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$5,600.00
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WAYNE GENERAL HOSPITAL 950 MATTHEW DR WAYNESBORO, MS 39367	Claim Number: 228 Claim Date: 12/13/2021 Debtor: MS HUD PINE VIEW, LLC
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UNSECURED	Claimed:	\$62,363.75	Scheduled:	\$8,519.64
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WAYNE GENERAL HOSPITAL 950 MATTHEW DR WAYNESBORO, MS 39367	Claim Number: 229 Claim Date: 12/13/2021 Debtor: MS HUD PINE VIEW, LLC
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UNSECURED	Claimed:	\$62,363.75
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WB HOWLAND CO LLC 610 11TH ST LIVE OAK, FL 32064	Claim Number: 216 Claim Date: 12/13/2021 Debtor: NF SUWANNEE, LLC
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UNSECURED	Claimed:	\$2,584.20	Scheduled:	\$1,314.36
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WEBB, PHILLIP ATTN ANTHONY & PARTNERS 100 S ASHLEY DR, STE 1600 TAMPA, FL 33602	Claim Number: 20001 Claim Date: 11/15/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$230,000.00
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

WESOLOWSKI, KATHLEEN
7720 56TH ST
PINELLAS PARK, FL 33781

Claim Number: 20119
Claim Date: 12/09/2021
Debtor: GULF COAST HEALTH CARE, LLC
Comments:
Claim Out of Balance Claim out of balance

ADMINISTRATIVE	Claimed:	\$13,650.00
PRIORITY	Claimed:	\$13,650.00
TOTAL	Claimed:	\$13,650.00

WET ONE LLC
C/O LOCKE LORD LLP
ATTN DAVID L SWANSON
2800 ROSS AVE, STE 2200
DALLAS, TX 75201

Claim Number: 82
Claim Date: 11/15/2021
Debtor: GULF COAST MASTER TENANT I, LLC

UNSECURED	Claimed:	\$180,000.00
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WIGINTON CORPORATION
699 AERO LN
SANFORD, FL 32771

Claim Number: 20388
Claim Date: 12/30/2021
Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED	Claimed:	\$1,544.86
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WISE CARTER CHILD & CARAWAY PA
PO BOX 651
JACKSON, MS 39205

Claim Number: 20363
Claim Date: 12/27/2021
Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED	Claimed:	\$70,336.55
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WOODALL'S A/C SERVICES INC
3608 HWY 90
MARIANNA, FL 32446

Claim Number: 20118
Claim Date: 12/09/2021
Debtor: GULF COAST HEALTH CARE, LLC

UNSECURED	Claimed:	\$478.00
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

WRIGHT, STEPHANIE 919 N MARKET ST, STE 1410 WILMINGTON, DE 19801-3046	Claim Number: 20009 Claim Date: 11/15/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$30,000.00
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WW GAY FIRE PROTECTION INC D/B/A WW GAY FIRE & INTEGRATED SYSTEMS 2251 ROSSELLE ST JACKSONVILLE, FL 32204	Claim Number: 45 Claim Date: 11/08/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$2,300.00
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WW GRAINGER INC 401 S WRIGHT RD, W4W.R47 JANESVILLE, WI 53546	Claim Number: 95 Claim Date: 11/19/2021 Debtor: GULF COAST HEALTH CARE, LLC
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ADMINISTRATIVE	Claimed:	\$4,155.27
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UNSECURED	Claimed:	\$10,256.78
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WW GRAINGER INC 401 S WRIGHT RD, W4W.R47 JANESVILLE, WI 53546	Claim Number: 96 Claim Date: 11/19/2021 Debtor: FL HUD BAYBREEZE, LLC
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ADMINISTRATIVE	Claimed:	\$4,155.27
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UNSECURED	Claimed:	\$10,256.78
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WW GRAINGER INC 401 S WRIGHT RD, W4W.R47 JANESVILLE, WI 53546	Claim Number: 97 Claim Date: 11/19/2021 Debtor: FL HUD DESTIN, LLC
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ADMINISTRATIVE	Claimed:	\$4,155.27
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UNSECURED	Claimed:	\$10,256.78
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

WW GRAINGER INC	Claim Number: 98
401 S WRIGHT RD, W4W.R47	Claim Date: 11/19/2021
JANESVILLE, WI 53546	Debtor: FL HUD PENSACOLA, LLC

ADMINISTRATIVE	Claimed:	\$4,155.27
UNSECURED	Claimed:	\$10,256.78

WW GRAINGER INC	Claim Number: 99
401 S WRIGHT RD, W4W.R47	Claim Date: 11/19/2021
JANESVILLE, WI 53546	Debtor: FL HUD ROSEWOOD, LLC

ADMINISTRATIVE	Claimed:	\$4,155.27
UNSECURED	Claimed:	\$10,256.78

WW GRAINGER INC	Claim Number: 100
401 S WRIGHT RD, W4W.R47	Claim Date: 11/19/2021
JANESVILLE, WI 53546	Debtor: MF LAKE EUSTIS, LLC

ADMINISTRATIVE	Claimed:	\$4,155.27
UNSECURED	Claimed:	\$10,256.78

WW GRAINGER INC	Claim Number: 101
401 S WRIGHT RD, W4W.R47	Claim Date: 11/19/2021
JANESVILLE, WI 53546	Debtor: MF WINTER PARK, LLC

ADMINISTRATIVE	Claimed:	\$4,155.27
UNSECURED	Claimed:	\$10,256.78

WW GRAINGER INC	Claim Number: 102
401 S WRIGHT RD, W4W.R47	Claim Date: 11/19/2021
JANESVILLE, WI 53546	Debtor: MS GREENBOUGH, LLC

ADMINISTRATIVE	Claimed:	\$4,155.27
UNSECURED	Claimed:	\$10,256.78

GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

WW GRAINGER INC
401 S WRIGHT RD, W4W.R47
JANESVILLE, WI 53546

Claim Number: 103
Claim Date: 11/19/2021
Debtor: MS HUD BOYINGTON, LLC

ADMINISTRATIVE	Claimed:	\$4,155.27
UNSECURED	Claimed:	\$10,256.78

WW GRAINGER INC
401 S WRIGHT RD, W4W.R47
JANESVILLE, WI 53546

Claim Number: 104
Claim Date: 11/19/2021
Debtor: MS HUD OCEAN SPRINGS, LLC

ADMINISTRATIVE	Claimed:	\$4,155.27
UNSECURED	Claimed:	\$10,256.78

WW GRAINGER INC
401 S WRIGHT RD, W4W.R47
JANESVILLE, WI 53546

Claim Number: 105
Claim Date: 11/19/2021
Debtor: MS SHELBY, LLC

ADMINISTRATIVE	Claimed:	\$4,155.27
UNSECURED	Claimed:	\$10,256.78

WW GRAINGER INC
401 S WRIGHT RD, W4W.R47
JANESVILLE, WI 53546

Claim Number: 106
Claim Date: 11/19/2021
Debtor: MS SINGING, LLC

ADMINISTRATIVE	Claimed:	\$4,155.27
UNSECURED	Claimed:	\$10,256.78

WW GRAINGER INC
401 S WRIGHT RD, W4W.R47
JANESVILLE, WI 53546

Claim Number: 107
Claim Date: 11/19/2021
Debtor: NF PENSACOLA MANOR, LLC

ADMINISTRATIVE	Claimed:	\$4,155.27
UNSECURED	Claimed:	\$10,256.78

GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

WW GRAINGER INC 401 S WRIGHT RD, W4W.R47 JANESVILLE, WI 53546	Claim Number: 108 Claim Date: 11/19/2021 Debtor: NF SUWANNEE, LLC
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ADMINISTRATIVE	Claimed:	\$4,155.27
UNSECURED	Claimed:	\$10,256.78

WW GRAINGER INC 401 S WRIGHT RD, W4W.R47 JANESVILLE, WI 53546	Claim Number: 109 Claim Date: 11/19/2021 Debtor: NF WINDSOR, LLC
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ADMINISTRATIVE	Claimed:	\$4,155.27
UNSECURED	Claimed:	\$10,256.78

WW GRAINGER INC 401 S WRIGHT RD, W4W.R47 JANESVILLE, WI 53546	Claim Number: 110 Claim Date: 11/19/2021 Debtor: SF BREVARD, LLC
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ADMINISTRATIVE	Claimed:	\$4,155.27
UNSECURED	Claimed:	\$10,256.78

WW GRAINGER INC 401 S WRIGHT RD, W4W.R47 JANESVILLE, WI 53546	Claim Number: 111 Claim Date: 11/19/2021 Debtor: SF KISSIMMEE, LLC
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ADMINISTRATIVE	Claimed:	\$4,155.27
UNSECURED	Claimed:	\$10,256.78

WW GRAINGER INC 401 S WRIGHT RD, W4W.R47 JANESVILLE, WI 53546	Claim Number: 112 Claim Date: 11/19/2021 Debtor: SF LAKE PLACID ALF, LLC
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ADMINISTRATIVE	Claimed:	\$4,155.27
UNSECURED	Claimed:	\$10,256.78

GULF COAST HEALTH CARE, LLC
 Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

WW GRAINGER INC 401 S WRIGHT RD, W4W.R47 JANESVILLE, WI 53546	Claim Number: 113 Claim Date: 11/19/2021 Debtor: SF LAKE PLACID, LLC
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ADMINISTRATIVE	Claimed:	\$4,155.27
UNSECURED	Claimed:	\$10,256.78

WYCHE, KRYSTAL 14 PRINCESS DELORES LN PALM COAST, FL 32164	Claim Number: 20054 Claim Date: 11/21/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$0.00 UNDET
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ZURAFF, CONNIE J 5790 COUNTY HWY 280E DEFUNIAK SPRINGS, FL 32435	Claim Number: 20124 Claim Date: 12/10/2021 Debtor: GULF COAST HEALTH CARE, LLC
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PRIORITY	Claimed:	\$8,400.00
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ZURICH AMERICAN INSURANCE PO BOX 68549 SCHAUMBURG, IL 60196	Claim Number: 123 Claim Date: 11/18/2021 Debtor: GULF COAST HEALTH CARE, LLC
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UNSECURED	Claimed:	\$0.00 UNLIQ
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ZURICH AMERICAN INSURANCE COMPANY FOX SWIBEL LEVIN & CARROLL C/O KEN THOMAS 200 W MADISON SUITE 3000 CHICAGO, IL 60606	Claim Number: 428 Claim Date: 01/03/2022 Debtor: SF BREVARD, LLC
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SECURED	Claimed:	\$0.00 UNDET
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

ZURICH AMERICAN INSURANCE COMPANY [MORE]	Claim Number: 403
FOX SWIBEL LEVIN & CARROLL C/O KEN[MORE]	Claim Date: 01/03/2022
200 W MADISON SUITE 3000	Debtor: SC-GA2018 COBBLESTONE REHABILITATION
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE COMPANY [MORE]	Claim Number: 405
FOX SWIBEL LEVIN & CARROLL C/O KEN[MORE]	Claim Date: 01/03/2022
200 W MADISON SUITE 3000	Debtor: MF WINTER PARK, LLC
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE COMPANY [MORE]	Claim Number: 409
FOX SWIBEL LEVIN & CARROLL	Claim Date: 01/03/2022
C/O KEN THOMAS	Debtor: MS HUD PINE VIEW, LLC
200 W MADISON SUITE 3000	
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE COMPANY [MORE]	Claim Number: 410
FOX SWIBEL LEVIN & CARROLL	Claim Date: 01/03/2022
C/O KEN THOMAS	Debtor: MS LAKESIDE, LLC
200 W MADISON SUITE 3000	
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE COMPANY [MORE]	Claim Number: 412
FOX SWIBEL LEVIN & CARROLL	Claim Date: 01/03/2022
C/O KEN THOMAS	Debtor: MS SINGING, LLC
200 W MADISON SUITE 3000	
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

ZURICH AMERICAN INSURANCE COMPANY [MORE]	Claim Number: 413
FOX SWIBEL LEVIN & CARROLL	Claim Date: 01/03/2022
C/O KEN THOMAS	Debtor: NF BRYNWOOD, LLC
200 W MADISON SUITE 3000	
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE COMPANY [MORE]	Claim Number: 414
FOX SWIBEL LEVIN & CARROLL	Claim Date: 01/03/2022
C/O KEN THOMAS	Debtor: NF CHIPOLA, LLC
200 W MADISON SUITE 3000	
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE COMPANY [MORE]	Claim Number: 415
FOX SWIBEL LEVIN & CARROLL	Claim Date: 01/03/2021
C/O KEN THOMAS	Debtor: NF ESCAMBIA, LLC
200 W MADISON SUITE 3000	
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE COMPANY [MORE]	Claim Number: 416
FOX SWIBEL LEVIN & CARROLL	Claim Date: 01/03/2022
C/O KEN THOMAS	Debtor: NF GLEN COVE, LLC
200 W MADISON SUITE 3000	
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE COMPANY [MORE]	Claim Number: 417
FOX SWIBEL LEVIN & CARROLL	Claim Date: 01/03/2022
C/O KEN THOMAS	Debtor: NF MANOR, LLC
200 W MADISON SUITE 3000	
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

ZURICH AMERICAN INSURANCE COMPANY [MORE]	Claim Number: 421
FOX SWIBEL LEVIN & CARROLL C/O[MORE]	Claim Date: 01/03/2022
200 W MADISON SUITE 3000	Debtor: NF RIVER CHASE, LLC
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE COMPANY [MORE]	Claim Number: 427
FOX SWIBEL LEVIN & CARROLL	Claim Date: 01/03/2022
C/O KEN THOMAS	Debtor: SF BOYNTON, LLC
200 W MADISON SUITE 3000	
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE COMPANY [MORE]	Claim Number: 429
C/O KEN THOMAS	Claim Date: 01/03/2022
200 W MADISON	Debtor: SF CARNEGIE, LLC
SUITE 3000	
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE COMPANY [MORE]	Claim Number: 431
FOX SWIBEL LEVIN & CARROLL	Claim Date: 01/03/2022
C/O KEN THOMAS	Debtor: SF GLEN OAKS, LLC
200 W MADISON SUITE 3000	
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE COMPANY [MORE]	Claim Number: 432
FOX SWIBEL LEVIN & CARROLL	Claim Date: 01/03/2022
C/O KEN THOMAS	Debtor: SF KISSIMMEE, LLC
200 W MADISON SUITE 3000	
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

ZURICH AMERICAN INSURANCE COMPANY [MORE]	Claim Number: 433
FOX SWIBEL LEVIN & CARROLL	Claim Date: 01/03/2022
C/O KEN THOMAS	Debtor: SF LAKE PLACID ALF, LLC
200 W MADISON SUITE 3000	
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE COMPANY [MORE]	Claim Number: 434
FOX SWIBEL LEVIN & CARROLL	Claim Date: 01/03/2022
C/O KEN THOMAS	Debtor: SF SALERNO, LLC
200 W MADISON SUITE 3000	
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE COMPANY [MORE]	Claim Number: 435
FOX SWIBEL LEVIN & CARROLL	Claim Date: 01/03/2022
C/O KEN THOMAS	Debtor: SF OAKBROOK, LLC
200 W MADISON SUITE 3000	
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE COMPANY [MORE]	Claim Number: 436
FOX SWIBEL LEVIN & CARROLL	Claim Date: 01/03/2022
C/O KEN THOMAS	Debtor: SF ROYAL MANOR, LLC
200 W MADISON SUITE 3000	
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE COMPANY [MORE]	Claim Number: 437
FOX SWIBEL LEVIN & CARROLL	Claim Date: 01/03/2022
C/O KEN THOMAS	Debtor: SF SALERNO, LLC
200 W MADISON SUITE 3000	
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

ZURICH AMERICAN INSURANCE COMPANY [MORE]	Claim Number: 438
FOX SWIBEL LEVIN & CARROLL	Claim Date: 01/03/2022
C/O KEN THOMAS	Debtor: SF TAMPA, LLC
200 W MADISON SUITE 3000	
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE COMPANY [MORE]	Claim Number: 439
FOX SWIBEL LEVIN & CARROLL	Claim Date: 01/03/2022
C/O KEN THOMAS	Debtor: AL CITRONELLE, LLC
200 W MADISON SUITE 3000	
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE COMPANY [MORE]	Claim Number: 440
FOX SWIBEL LEVIN & CARROLL	Claim Date: 01/03/2022
C/O KEN THOMAS	Debtor: AL WILLOW TREE, LLC
200 W MADISON SUITE 3000	
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE COMPANY [MORE]	Claim Number: 446
FOX SWIBEL LEVIN & CARROLL	Claim Date: 01/03/2022
C/O KEN THOMAS	Debtor: FL HUD PENSACOLA, LLC
200 W MADISON SUITE 3000	
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE COMPANY [MORE]	Claim Number: 447
FOX SWIBEL LEVIN & CARROLL	Claim Date: 01/03/2022
C/O KEN THOMAS	Debtor: FL HUD ROSEWOOD, LLC
200 W MADISON SUITE 3000	
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

ZURICH AMERICAN INSURANCE COMPANY [MORE]	Claim Number: 448
FOX SWIBEL LEVIN & CARROLL	Claim Date: 01/03/2022
C/O KEN THOMAS	Debtor: FL HUD SILVERCREST, LLC
2000 W MADISON SUITE 3000	
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE COMPANY [MORE]	Claim Number: 449
FOX SWIBEL LEVIN & CARROLL	Claim Date: 01/03/2022
C/O KEN THOMAS	Debtor: FLORIDA FACILITIES, LLC
200 W MADISON SUITE 3000	
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE COMPANY [MORE]	Claim Number: 450
FOX SWIBEL LEVIN & CARROLL	Claim Date: 01/03/2022
C/O KEN THOMAS	Debtor: GCH MANAGEMENT SERVICES, LLC
200 W MADISON SUITE 3000	
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE COMPANY [MORE]	Claim Number: 451
C/O KEN THOMAS	Claim Date: 01/03/2021
200 W MADISON	Debtor: HUD FACILITIES, LLC
SUITE 3000	
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE COMPANY [MORE]	Claim Number: 454
FOX SWIBEL LEVIN & CARROLL	Claim Date: 01/03/2022
C/O KEN THOMAS	Debtor: GULF COAST MASTER TENANT II, LLC
200 W MADISON SUITE 3000	
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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GULF COAST HEALTH CARE, LLC
Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

ZURICH AMERICAN INSURANCE COMPANY [MORE]	Claim Number: 455
FOX SWIBEL LEVIN & CARROLL	Claim Date: 01/03/2022
C/O KEN THOMAS	Debtor: GULF COAST MASTER TENANT III, LLC
200 W MADISON AVE SUITE 3000	
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE COMPANY [MORE]	Claim Number: 456
FOX SWIBEL LEVIN & CARROLL	Claim Date: 01/03/2022
C/O KEN THOMAS	Debtor: HUD FACILITIES, LLC
200 W MADISON SUITE 3000	
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE COMPANY [MORE]	Claim Number: 457
FOX SWIBEL LEVIN & CARROLL	Claim Date: 01/03/2022
C/O KEN THOMAS	Debtor: MF DEBARY, LLC
200 W MADISON SUITE 3000	
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE COMPANY [MORE]	Claim Number: 458
FOX SWIBEL LEVIN & CARROLL	Claim Date: 01/03/2022
C/O KEN THOMAS	Debtor: MF FLAGLER, LLC
200 W MADISON SUITE 3000	
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE COMPANY [MORE]	Claim Number: 459
FOX SWIBEL LEVIN & CARROLL	Claim Date: 01/03/2022
C/O KEN THOMAS	Debtor: MF HALIFAX, LLC
200 W MADISON SUITE 3000	
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

ZURICH AMERICAN INSURANCE COMPANY [MORE]	Claim Number: 460
C/O KEN THOMAS	Claim Date: 01/03/2022
200 W MADISON SUITE 3000	Debtor: MF HERITAGE, LLC
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE COMPANY, [MORE]	Claim Number: 402
C/O KEN THOMAS	Claim Date: 01/03/2021
200 W MADISON	Debtor: GULF COAST HEALTH CARE, LLC
SUITE 3000	
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE COMPANY, [MORE]	Claim Number: 404
FOX SWIBEL LEVIN & CARROLL C/O KEN [MORE]	Claim Date: 01/03/2022
200 W MADISON SUITE 3000	Debtor: MS GREENBOUGH, LLC
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE COMPANY, [MORE]	Claim Number: 406
FOX SWIBEL LEVIN & CARROLL C/O KEN [MORE]	Claim Date: 01/03/2022
200 W MADISON SUITE 3000	Debtor: MS HUD BOYINGTON, LLC
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE COMPANY, [MORE]	Claim Number: 407
FOX SWIBEL LEVIN & CARROLL C/O KEN [MORE]	Claim Date: 01/03/2022
200 W MADISON SUITE 3000	Debtor: MS HUD DIXIE, LLC
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

ZURICH AMERICAN INSURANCE COMPANY,[MORE]	Claim Number: 418
FOX SWIBEL LEVIN & CARROLL C/O KEN[MORE]	Claim Date: 01/03/2022
200 W MADISON SUITE 3000	Debtor: NF NINE MILE, LLC
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE COMPANY,[MORE]	Claim Number: 419
FOX SWIBEL LEVIN & CARROLL C/O KEN[MORE]	Claim Date: 01/03/2022
200 W MADISON SUITE 3000	Debtor: NF PANAMA, LLC
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE COMPANY,[MORE]	Claim Number: 420
FOX SWIBEL LEVIN & CARROLL C/O KEN[MORE]	Claim Date: 01/03/2022
200 W MADISON SUITE 3000	Debtor: NF PENSACOLA MANOR, LLC
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE COMPANY,[MORE]	Claim Number: 422
FOX SWIBEL LEVIN & CARROLL C/O KEN[MORE]	Claim Date: 01/03/2022
200 W MADISON SUITE 3000	Debtor: NF SUWANNEE, LLC
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE COMPANY,[MORE]	Claim Number: 423
FOX SWIBEL LEVIN & CARROLL C/O KEN[MORE]	Claim Date: 01/03/2022
200 W MADISON SUITE 3000	Debtor: NF WINDSOR, LLC
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE COMPANY,[MORE]
FOX SWIBEL LEVIN & CARROLL C/O KEN[MORE]
200 W MADISON SUITE 3000
CHICAGO, IL 60606

Claim Number: 424
Claim Date: 01/03/2022
Debtor: PENSACOLA ADMINISTRATIVE HOLDINGS, LLC

SECURED Claimed: \$0.00 UNDET

ZURICH AMERICAN INSURANCE COMPANY,[MORE]
FOX SWIBEL LEVIN & CARROLL C/O KEN[MORE]
200 W MADISON SUITE 3000
CHICAGO, IL 60606

Claim Number: 425
Claim Date: 01/03/2022
Debtor: PENSACOLA ADMINISTRATIVE SERVICES, LLC

SECURED Claimed: \$0.00 UNDET

ZURICH AMERICAN INSURANCE COMPANY,[MORE]
FOX SWIBEL LEVIN & CARROLL
C/O KEN THOMAS
200 W MADISON SUITE 3000
CHICAGO, IL 60606

Claim Number: 426
Claim Date: 01/03/2022
Debtor: SF BERKSHIRE, LLC

SECURED Claimed: \$0.00 UNDET

ZURICH AMERICAN INSURANCE COMPANY,[MORE]
FOX SWIBEL LEVIN & CARROLL C/O KEN[MORE]
200 W MADISON SUITE 3000
CHICAGO, IL 60606

Claim Number: 441
Claim Date: 01/03/2022
Debtor: BREVARD OAKS CENTER, LLC

SECURED Claimed: \$0.00 UNDET

ZURICH AMERICAN INSURANCE COMPANY,[MORE]
FOX SWIBEL LEVIN & CARROLL C/O KEN[MORE]
200 W MADISON SUITE 3000
CHICAGO, IL 60606

Claim Number: 442
Claim Date: 01/03/2022
Debtor: FL HUD BAYBREEZE, LLC

SECURED Claimed: \$0.00 UNDET

ZURICH AMERICAN INSURANCE COMPANY,[MORE]	Claim Number: 443
FOX SWIBEL LEVIN & CARROLL C/O KEN[MORE]	Claim Date: 01/03/2022
200 W MADISON SUITE 3000	Debtor: FL HUD BAYSIDE, LLC
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE COMPANY,[MORE]	Claim Number: 444
FOX SWIBEL LEVIN & CARROLL C/O KEN[MORE]	Claim Date: 01/03/2022
200 W MADISON SUITE 3000	Debtor: FL HUD DESTIN, LLC
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE COMPANY,[MORE]	Claim Number: 445
FOX SWIBEL LEVIN & CARROLL	Claim Date: 01/03/2022
C/O KEN THOMAS	Debtor: FL HUD MARGATE, LLC
200 W MADISON SUITE 3000	
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE COMPANY,[MORE]	Claim Number: 452
FOX SWIBEL LEVIN & CARROLL C/O KEN[MORE]	Claim Date: 01/03/2022
200 W MADISON SUITE 3000	Debtor: GULF COAST MASTER TENANT HOLDINGS, LLC
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE COMPANY,[MORE]	Claim Number: 453
FOX SWIBEL LEVIN & CARROLL C/O KEN[MORE]	Claim Date: 01/03/2022
200 W MADISON SUITE 3000	Debtor: GULF COAST MASTER TENANT I, LLC
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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GULF COAST HEALTH CARE, LLC

Alphabetical Claims Register for Gulf Coast Health Care, LLC (ALL CASES)

ZURICH AMERICAN INSURANCE COMPANY,[MORE]	Claim Number: 461
FOX SWIBEL LEVIN & CARROLL C/O KEN[MORE]	Claim Date: 01/03/2022
200 W MADISON SUITE 3000	Debtor: MF LAKE EUSTIS, LLC
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE COMPANY,[MORE]	Claim Number: 462
FOX SWIBEL LEVIN & CARROLL C/O[MORE]	Claim Date: 01/03/2022
200 W MADISON SUITE 3000	Debtor: MF LONGWOOD, LLC
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE COMPANY,[MORE]	Claim Number: 463
FOX SWIBEL LEVIN & CARROLL C/O KEN[MORE]	Claim Date: 01/03/2022
200 W MADISON SUITE 3000	Debtor: MF OAKWOOD, LLC
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE [MORE]	Claim Number: 408
FOX SWIBEL LEVIN & CARROLL	Claim Date: 01/03/2022
C/O KEN THOMAS	Debtor: MS HUD OCEAN SPRINGS, LLC
200 W MADISON SUITE 3000	
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURANCE [MORE]	Claim Number: 430
C/O KEN THOMAS	Claim Date: 01/03/2021
200 W MADISON	Debtor: SF FOUNTAINHEAD, LLC
SUITE 3000	
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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ZURICH AMERICAN INSURNACE COMPANY [MORE]	Claim Number: 411
FOX SWIBEL LEVIN & CARROLL	Claim Date: 01/03/2022
C/O KEN THOMAS	Debtor: MS SHELBY, LLC
200 W MADISON SUITE 3000	
CHICAGO, IL 60606	

SECURED	Claimed:	\$0.00	UNDET
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Summary Page

Total Number of Filed Claims: 909

	Claimed Amount	Allowed Amount
Administrative:	\$265,937.90	\$76,817.31
Priority:	\$820,761.46	\$0.00
Secured:	\$1,392,601,217.60	\$0.00
Unsecured:	\$1,150,634,345.00	\$0.00
Total:	\$2,544,322,261.96	\$76,817.31