

**United States Bankruptcy Court  
Middle District of Alabama**

In re The Money Tree of Florida, Inc.  
Debtor

Case No. 11-12257

Chapter 11 Case

**MONTHLY OPERATING REPORT (NON-SMALL BUSINESS ENTITY)**

Month: November

Date Filed: 2012-12-17

Line of Business: Consumer Lending

NAICS Code: 522291

IN ACCORDANCE WITH TITLE 28, SECTION 1746, OF THE UNITED STATES CODE, I DECLARE UNDER PENALTY OF PERJURY THAT I HAVE EXAMINED THE FOLLOWING MONTHLY OPERATING REPORT AND THE ACCOMPANYING ATTACHMENTS AND, TO THE BEST OF MY KNOWLEDGE, THESE DOCUMENTS ARE TRUE, CORRECT AND COMPLETE.

RESPONSIBLE PARTY

ORIGINAL SIGNATURE OF RESPONSIBLE PARTY

S. Gregory Hays - Chapter 11 Trustee

PRINTED NAME OF RESPONSIBLE PARTY

**QUESTIONNAIRE: (All questions to be answered on behalf of the debtor.)**

	YES	NO
1. IS THE BUSINESS STILL OPERATING ?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. HAVE YOU PAID ALL YOUR BILLS ON TIME THIS MONTH?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. DID YOU PAY YOUR EMPLOYEES ON TIME?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. HAVE YOU DEPOSITED ALL THE RECEIPTS FOR YOUR BUSINESS IN TO THE DIP ACCOUNT THIS MONTH?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. HAVE YOU FILED ALL OF YOUR TAX RETURNS AND PAID ALL OF YOUR TAXES THIS MONTH?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. HAVE YOU TIMELY FILED ALL OTHER REQUIRED GOVERNMENT FILINGS?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7. HAVE YOU PAID ALL OF YOUR INSURANCE PREMIUMS THIS MONTH?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8. DO YOU PLAN TO CONTINUE TO OPERATE THE BUSINESS NEXT MONTH?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9. ARE YOU CURRENT ON YOUR CHAPTER 11 QUARTERLY FEE PAYMENT ?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
10. HAVE YOU PAID ANYTHING TO YOUR ATTORNEY OR OTHER PROFESSIONAL THIS MONTH?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
11. DID YOU HAVE ANY UNUSUAL OR SIGNIFICANT UNANTICIPATED EXPENSES THIS MONTH?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
12. HAS THE BUSINESS SOLD ANY GOODS OR PROVIDED SERVICES OR TRANSFERRED ANY ASSETS TO ANY BUSINESS RELATED TO THE DIP IN ANY WAY?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
13. DO YOU HAVE ANY BANK ACCOUNTS OPBN OTHER THAN THE DIP ACCOUNT(S)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

14. HAVE YOU SOLD ANY ASSETS OTHER THAN INVENTORY THIS MONTH?
15. DID ANY INSURANCE COMPANY CANCEL YOUR POLICY THIS MONTH?
16. HAVE YOU BORROWED MONEY FROM ANYONE THIS MONTH?
17. HAS ANYONE MADE AN INVESTMENT IN YOUR BUSINESS THIS MONTH?
18. HAVE YOU PAID ANY BILLS YOU OWED BEFORE YOU FILED BANKRUPTCY?

**TAXES** *(Exhibit A)*

- DO YOU HAVE ANY PAST DUE TAX RETURNS OR PAST DUE POST-PETITION TAX OBLIGATIONS? IF YES, PLEASE PROVIDE A WRITTEN EXPLANATION INCLUDING WHEN SUCH RETURNS WILL BE FILED, OR WHEN SUCH PAYMENTS WILL BE MADE AND THE SOURCE OF THE FUNDS FOR THE PAYMENT.

**INCOME** *(Exhibit B)*

PLEASE SEPARATELY LIST ALL OF THE INCOME YOU RECEIVED FOR THE MONTH. THE LIST SHOULD INCLUDE ALL INCOME FROM CASH AND CREDIT TRANSACTIONS.

**TOTAL INCOME** \$1,859.00

**SUMMARY OF CASH ON HAND**

Cash on Hand at Start of Month \$57,729.00

Cash on Hand at end of Month \$53,925.00

PLEASE PROVIDE THE TOTAL AMOUNT OF CASH CURRENTLY AVAILABLE TO YOU. **TOTAL** \$53,925.00

**EXPENSES** *(Exhibit C)*

PLEASE SEPARATELY LIST ALL EXPENSES PAID FROM YOUR BANK ACCOUNTS THIS MONTH. INCLUDE THE DATE PAID, WHO WAS PAID THE MONEY, THE PURPOSE AND THE AMOUNT.

**TOTAL EXPENSES** \$5,663.00

**CASH PROFIT**

INCOME FOR THE MONTH (TOTAL FROM EXHIBIT B) \$1,859.00

EXPENSES FOR THE MONTH (TOTAL FROM EXHIBIT C) \$5,663.00

(Subtract Line C from Line B) **CASH PROFIT FOR THE MONTH** (\$3,804.00)

**UNPAID BILLS** *(Exhibit D)*

PLEASE ATTACH A LIST OF ALL DEBTS (INCLUDING TAXES) WHICH YOU HAVE INCURRED SINCE THE DATE YOU FILED BANKRUPTCY BUT HAVE NOT PAID. THE LIST MUST INCLUDE THE DATE THE DEBT WAS INCURRED, WHO IS OWED THE MONEY, THE PURPOSE OF THE DEBT AND WHEN THE DEBT IS DUE.

**TOTAL PAYABLES** \$0.00

**MONEY OWED TO YOU** *(Exhibit E)*

PLEASE ATTACH A LIST OF ALL AMOUNTS OWED TO YOU BY YOUR CUSTOMERS FOR WORK YOU HAVE DONE OR THE MERCHANDISE YOU HAVE SOLD. YOU SHOULD INCLUDE WHO OWES YOU MONEY, HOW MUCH IS OWED AND WHEN IS PAYMENT DUE.

**TOTAL RECEIVABLES** \$8,250.00

**BANKING INFORMATION** *(Exhibit F)*

PLEASE ATTACH A COPY OF YOUR LATEST BANK STATEMENT FOR EVERY ACCOUNT YOU HAVE AS OF THE DATE OF THIS FINANCIAL REPORT OR HAD DURING THE PERIOD COVERED BY THIS REPORT.

**EMPLOYEES**

NUMBER OF EMPLOYEES WHEN THE CASE WAS FILED?

4

NUMBER OF EMPLOYEES AS OF THE DATE OF THIS MONTHLY REPORT?

0

**PROFESSIONAL FEES***BANKRUPTCY RELATED*

PROFESSIONAL FEES RELATING TO THE BANKRUPTCY CASE PAID DURING THIS REPORTING PERIOD? \$0.00

TOTAL PROFESSIONAL FEES RELATING TO THE BANKRUPTCY CASE PAID SINCE THE FILING OF THE CASE? \$0.00

*NON-BANKRUPTCY RELATED:*

PROFESSIONAL FEES PAID NOT RELATING TO THE BANKRUPTCY CASE PAID DURING THIS REPORTING PERIOD? \$0.00

TOTAL PROFESSIONAL FEES PAID NOT RELATING TO THE BANKRUPTCY CASE PAID DURING THIS REPORTING PERIOD? \$0.00

**ADDITIONAL INFORMATION**

**PLEASE ATTACH THE BANKRUPTCY ADMINISTRATOR'S BALANCE SHEET, MONTHLY SALARY PAYMENTS TO OWNER(S) SCHEDULE (IF APPLICABLE) AND THE MONTHLY RENTAL INCOME WORKSHEET (IF APPLICABLE). ALSO ATTACH ANY FINANCIAL REPORTS (INCOME STATEMENT, STATEMENT OF CASH FLOWS, AND STATEMENT OF SHAREHOLDERS/PARTNER'S EQUITY) WHICH YOU PREPARE INTERNALLY.**

**Print Form**

Case 11-12254

Doc 669

Filed 12/17/12  
DocumentEntered 12/17/12 15:09:33  
Page 4 of 14**Reset Form**

The Money Tree of Florida, Inc. Case # 11-12257

BALANCE SHEET

For the period ending: 11/25/12

ASSETS

1. Cash

Pre-petition bank accounts	\$1,783.00	
DIP General/business account	\$52,142.00	
DIP Payroll account	\$0.00	
DIP Tax account	\$0.00	
Other (including Cash on Hand)	\$0.00	
Sub-total Cash		\$53,925.00

2. Securities

\$0.00

3. Accounts Receivable

Pre-petition	\$0.00	
Post-petition:		
Customer finance receivables, net	\$0.00	
Other receivables	\$8,250.00	
Sub-total Accounts Receivable		\$8,250.00

4. Office Supplies and Equipment

\$0.00

5. Inventory (Fair Market Value)

\$0.00

6. Other Current Assets (rent/utility deposits)

\$0.00

7. Prepaid Insurance

\$0.00

8. Long Term Assets ( including real property, heavy equipment, vehicles, etc. )

\$0.00

**9. TOTAL ASSETS**

\$62,175.00

LIABILITIES

(include both pre- and post-petition debts)

1. Accounts Payable

Pre-petition	\$19,999.00	
Post-petition	\$0.00	
Sub-total Accounts Payable		\$19,999.00

2. Short Term Notes Payable

Pre-petition	\$0.00	
Post-petition	\$0.00	
Sub-total Short Term Notes Payable		\$0.00

3. Long Term Notes Payable

Pre-petition	\$0.00	
Post-petition	\$0.00	
Sub-total Long Term Notes Payable		\$0.00

4. Taxes Payable

Pre-petition	\$0.00	
Post-petition	\$0.00	
Sub-total Taxes Payable		\$0.00

5. Other Liabilities

\$0.00

Intercompany debt to Parent Co.

\$3,155,582.00

6. TOTAL LIABILITIES

\$3,175,581.00

EQUITY (Total Assets Less Total Liabilities)

(\$3,113,406.00)

**7. TOTAL LIABILITIES & EQUITY**

\$62,175.00

Additional Information

Case 11-12254

Doc 669

Filed 12/17/12

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Balance Sheet/AP Pymts/  
Salary Schedule/Rent Roll

STATEMENT OF PAYMENTS MADE TO LESSORS

1	Payee: <b>NONE</b>	_____	
	Amount paid this period:	_____	Check #: _____
Y N	Amount included in Expenses		
Y N	Adequate protection payment		
	Stated adequate protection payment amount	_____	
2	Payee: _____		
	Amount paid this period:	_____	Check #: _____
Y N	Amount included in Expenses		
Y N	Adequate protection payment		
	Stated adequate protection payment amount	_____	
3	Payee: _____		
	Amount paid this period:	_____	Check #: _____
Y N	Amount included in Expenses		
Y N	Adequate protection payment		
	Stated adequate protection payment amount	_____	
4	Payee: _____		
	Amount paid this period:	_____	Check #: _____
Y N	Amount included in Expenses		
Y N	Adequate protection payment		
	Stated adequate protection payment amount	_____	
5	Payee: _____		
	Amount paid this period:	_____	Check #: _____
Y N	Amount included in Expenses		
Y N	Adequate protection payment		
	Stated adequate protection payment amount	_____	
6	Payee: _____		
	Amount paid this period:	_____	Check #: _____
Y N	Amount included in Expenses		
Y N	Adequate protection payment		
	Stated adequate protection payment amount	_____	
7	Payee: _____		
	Amount paid this period:	_____	Check #: _____
Y N	Amount included in Expenses		
Y N	Adequate protection payment		
	Stated adequate protection payment amount	_____	
8	Payee: _____		
	Amount paid this period:	_____	Check #: _____
Y N	Amount included in Expenses		
Y N	Adequate protection payment		
	Stated adequate protection payment amount	_____	

TOTAL PAYMENTS MADE TO SECURED CREDITORS AND LESSORS \$2,300.00

**Monthly Salary Payment to Owner(s)**

Debtor(s)	Stated Amount	Amount Paid	Transaction Number	Amount Past Due
NONE				
<b>TOTAL</b>				

**Monthly Rental Income Worksheet**

for the month ending \_\_\_\_\_

Property Description	Written Contract*	Contract Expiration Date	Contracted Monthly Rental Payment	Rental Amount Past Due	Rental Amount Received this Month	Mortgage Amount Paid by Debtor(s) **
NONE						
<b>Monthly Totals</b>						

\* (N)-No Contract, (L)-Lease or (DF)-Debtor-Financed under a Rent to Own, Bond for Title or similar contract  
 \*\* Per Order for Adequate Protection or Use of Cash Collateral

THE MONEY TREE OF FLORIDA INC.  
INCOME STATEMENT  
FOR THE MONTH ENDED NOVEMBER 25, 2012

OPERATING INCOME

OTHER INCOME	0.00
TOTAL INCOME	<u>0.00</u>

OPERATING EXPENSES

ACCOUNTING	0.00
AUTO EXPENSES	0.00
COMPUTER MAINTENANCE	0.00
CREDIT REPORTS	0.00
DEPRECIATION	0.00
INSURANCE - GENERAL	0.00
INSURANCE - GROUP	0.00
LEGAL/ATTORNEY COSTS	0.00
MISCELLANEOUS	5,467.82
OFFICE EXPENSE	54.58
POSTAGE	0.00
RECORDING FEES	0.00
RENT	0.00
REPAIRS & MAINTENANCE	0.00
REGULAR PAY	0.00
OVERTIME PAY	0.00
TEMPORARY HELP	0.00
SUPPLIES	0.00
PAYROLL TAXES	112.49
PROPERTY TAXES	0.00
TELEPHONE	0.00
UTILITIES	500.00

TOTAL OPERATING EXPENSES	<u>6,134.89</u>
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NET PROFIT (LOSS)	<u><u>(6,134.89)</u></u>
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THE MONEY TREE OF FLORIDA  
Statement of Cash Flows

For the Month Ended  
November 25, 2012

<b>Cash flows from operating activities</b>	
Net income	\$ (6,135)
Adjustments to reconcile net income to net cash provided by operating activities:	
Provision for credit losses	-
Depreciation	-
Change in assets and liabilities:	
Other receivables/assets	8,872
Accounts payable and other accrued liabilities	(542)
Due from affiliates	(6,000)
Loss (Gain) on the sale of property and equipment	-
<hr/>	
Net cash used in operating activities	(3,804)
<hr/>	
<b>Cash flows from investing activities</b>	
Net change in finance receivables	-
Purchase of property and equipment	-
Proceeds from sale of property and equipment	-
<hr/>	
Net cash provided by investing activities	-
<hr/>	
<b>Cash flows from financing activities</b>	
Net proceeds (repayments) on:	
Borrowing	-
<hr/>	
Net cash provided by financing activities	-
<hr/>	
Net change in cash and cash equivalents	(3,804)
Cash and cash equivalents, beginning of period	57,729
Cash and cash equivalents, end of period	\$ 53,925

# EXHIBIT A

## TAXES

IF ANY PAST DUE TAX RETURNS OR PAST DUE POST-PETITION TAX OBLIGATIONS EXIST, ATTACH A WRITTEN EXPLANATION, INCLUDING WHEN SUCH RETURNS WILL BE FILED, OR WHEN SUCH PAYMENTS WILL BE MADE AND THE SOURCE OF FUNDS FOR THE PAYMENTS (S).

**The Money Tree of Florida, Inc.**  
**Case # 11-12257**

**NONE**

# EXHIBIT B

## SUMMARY OF CASH ON HAND

ATTACH A LIST OF ALL INCOME RECEIVED FOR THE REPORTING PERIOD FROM CASH AND CREDIT TRANSACTIONS.

The U.S. Bankruptcy Administrator (MDAL) will not waive this requirement.

The Money Tree of Florida, Inc.  
Case # 11-12257

Total Cash at 10/25/11	57,729
Total Cash at 11/25/11	<u>53,925</u>
Change	<u>(3,804)</u>
Inflows from loan repayments	-
Outflows for new loans	-
Net inflow (outflow) from lending	<u>-</u>
Other inflows	1,859
Outflow for expenses	(663)
Other outflows	<u>(5,000)</u>
Net cash profit	<u>(3,804)</u>

# EXHIBIT C

## EXPENSES

ATTACH A LIST OF ALL EXPENSES PAID FROM THE DEBTOR'S BANK ACCOUNTS FOR THE REPORTING PERIOD. INCLUDE THE DATE PAID, THE PAYEE, THE PURPOSE AND THE AMOUNT.

The U.S. Bankruptcy Administrator (MDAL) will not waive this requirement.

THE MONEY TREE OF FLORIDA, INC.  
Case # 11-12257

Check Nbr	Check Type	Check Date	Vendor ID Vendor Name	Period	Ref Nbr	Doc Type	Invoice Number	Invoice Date	Amount Paid
100180	CK	10/29/2012	MONE04 THE MONEY TREE OF FLORID	02-13	206173	VO		10/29/2012	13.17
100181	CK	10/29/2012	CLER54 CLERK OF COURT ( BANKRUF	02-13	206176	VO	11-12257	10/29/2012	650.00
<b>Sub Total:</b>									<b>663.17</b>
EFT	Transfers to bank account of Parent Co.								<u>5,000.00</u>
<b>Total</b>									<b>5,663.17</b>

# EXHIBIT D

## UNPAID BILLS

ATTACH A LIST OF ALL DEBTS (INCLUDING TAXES) INCURRED SINCE THE BANKRUPTCY FILING DATE BUT HAVE NOT BEEN PAID. THE LIST MUST INCLUDE THE DATE THE DEBT WAS INCURRED, THE NAME OF THE CREDITOR, THE PURPOSE OF THE DEBT AND WHEN THE DEBT IS DUE.

The U.S. Bankruptcy Administrator (MDAL) will not waive this requirement.

The Money Tree of Florida, Inc.  
Case # 11-12257

<u>Date incurred</u>	<u>Creditor</u>	<u>Amount</u>	<u>Purpose</u>	<u>Due</u>
NONE				

# EXHIBIT E

## MONEY OWED TO DEBTOR

ATTACH A LIST OF ALL AMOUNTS OWED TO THE DEBTOR BY CUSTOMERS FOR WORK COMPLETED OR MERCHANDISE SOLD. THE LIST MUST INCLUDE THE NAME OF THE CUSTOMER, THE AMOUNT OWED AND WHEN PAYMENT IS DUE.

The U.S. Bankruptcy Administrator (MDAL) will not waive this requirement.

The Money Tree of Florida, Inc.

Case # 11-12257

Customer Finance receivables, net (1)	-
Commissions on insurance products sold	8,250
Insurance claims	-
	<u>8,250</u>

(1) net of unearned interest, fees, insurance commissions and the allowance for loan losses

Customer finance receivables, net (1)	-
Unearned insurance commissions	-
Allowance for loan losses	-
Accrued interest receivable	-
Customer finance receivables, gross	<u>-</u>

### Aging of Customer finance receivables, gross

Total	Current	1 - 30 days	31 - 60 days	61 - 90 days	91 - 180 days	over 180 days
-	-	-	-	-	-	-