

UNITED STATES BANKRUPTCY COURT

Western District of Missouri

ORIGINAL

Notice of Chapter 11 Bankruptcy Case, Meeting of Creditors, & Deadlines

A chapter 11 bankruptcy case concerning the debtor corporation listed below was filed on 10/14/02.

You may be a creditor of the debtor. **This notice lists important deadlines.** You may want to consult an attorney to protect your rights. All documents filed in the case may be inspected at the bankruptcy clerk's office at the address listed below. **NOTE:** The staff of the bankruptcy clerk's office cannot give legal advice.

See Reverse Side For Important Explanations.

Debtor (name(s) and address):
Telecommunications Resources, Inc.
T Resources, Inc.; TRI; TRI, Inc.
8 Victor Lane
Suite 300
Liberty, MO 64068

Case Number:
02-51141

Taxpayer ID Nos.:
431644767

Attorney for Debtor (name and address):
Larry E. Parres
Lewis, Rice & Fingersh
500 N. Broadway, Ste 2000
St. Louis, MO 63102

Telephone number: 314-444-7660

Meeting of Creditors:

Date: 11/13/02 Time: 01:30 PM

Location: Room 2110A, 400 East 9th Street, Kansas City, MO 64106

Deadline to File a Proof of Claim:

Proof of Claim must be received by the bankruptcy clerk's office by the following deadline:
Notice of that date will be sent at a later time.

Creditors May Not Take Certain Actions:

The filing of the bankruptcy case automatically stays certain collection and other actions against the debtor and the debtor's property. If you attempt to collect a debt or take other action in violation of the Bankruptcy Code, you may be penalized.

Address of the Bankruptcy Clerk's Office:

Telephone number: (816) 512-1800

For the Court:

Clerk of the Bankruptcy Court:
Patricia L. Brune

Hours Open:
Monday - Friday 9:00 AM - 4:30 PM

Date:
10/18/02

The debtor must file a plan of reorganization and disclosure statement within 120 days (100 days if small business) of the date the case was filed. Failure to do so may result in dismissal of the case or conversion to Chapter 7.

If hearing location is Kansas City, please call (816) 512-1800 menu item #6 for information regarding handicapped access to the courthouse.

- AUS _____
- CAF _____
- CMP _____
- COM _____
- CTR _____
- ECR _____
- GCL _____
- OPC _____
- MMS _____
- SEC 1
- OTH ADD/MP

DOCUMENT NUMBER-DATE

11637 OCT 24 02

FPSC-COMMISSION CLERK

EXPLANATIONS

FORM B9F(9/97)

Filing of Chapter 11 Bankruptcy Case	A bankruptcy case under chapter 11 of the Bankruptcy Code (title 11, United States Code) has been filed in this court by or against the debtor listed on the front side, and an order for relief has been entered. Chapter 11 allows a debtor to reorganize or liquidate pursuant to a plan. A plan is not effective unless confirmed by the court. You may be sent a copy of the plan and a disclosure statement telling you about the plan, and you might have the opportunity to vote on the plan. You will be sent notice of the date of the confirmation hearing, and you may object to confirmation of the plan and attend the confirmation hearing. Unless a trustee is serving, the debtor will remain in possession of the debtor's property and may continue to operate any business.
Creditors May Not Take Certain Actions	Prohibited collection actions are listed in Bankruptcy Code §362. Common examples of prohibited actions include contacting the debtor by telephone, mail or otherwise to demand repayment; taking actions to collect money or obtain property from the debtor; repossessing the debtor's property; starting or continuing lawsuits or foreclosures.
Meeting of Creditors	A meeting of creditors is scheduled for the date, time and location listed on the front side. <i>The debtor's representative must be present at the meeting to be questioned under oath by the trustee and by creditors.</i> Creditors are welcome to attend, but are not required to do so. The meeting may be continued and concluded at a later date without further notice.
Claims	A Proof of Claim is a signed statement describing a creditor's claim. If a Proof of Claim form is not included with this notice, you can obtain one at any bankruptcy clerk's office. You may look at the schedules that have been or will be filed at the bankruptcy clerk's office. If your claim is scheduled and is <i>not</i> listed as disputed, contingent, or unliquidated, it will be allowed in the amount scheduled unless you file a Proof of Claim or you are sent further notice about the claim. Whether or not your claim is scheduled, you are permitted to file a Proof of Claim. If your claim is not listed at all <i>or</i> if your claim is listed as disputed, contingent, or unliquidated, then you must file a Proof of Claim or you might not be paid any money on your claim against the debtor in the bankruptcy case. The court has not yet set a deadline to file a Proof of Claim. If a deadline is set you will be sent another notice.
Discharge of Debts	Confirmation of a chapter 11 plan may result in a discharge of debts, which may include all or part of your debt. See Bankruptcy Code §1141(d). A discharge means that you may never try to collect the debt from the debtor, except as provided in the plan.
Bankruptcy Clerk's Office	Any paper that you file in this bankruptcy case should be filed at the bankruptcy clerk's office at the address listed on the front side. You may inspect all papers filed, including the list of the debtor's property and debts, at the bankruptcy clerk's office.
Legal Advice	The staff of the bankruptcy clerk's office cannot give legal advice. You may want to consult an attorney to protect your rights.
---Refer to Other Side For Important Deadlines and Notices---	

UNITED STATES BANKRUPTCY COURT		PROOF OF CLAIM		File original and 1 copy of claim (both with all attachments) Mail Additional Copy to Debtor's Attorney. See Item 8 below for return copy Mailing address: U.S. Bankruptcy Court 400 East 9th Street, Rm 1510 Kansas City MO 64106		
Western District of Missouri						
In re (Name of Debtor) Telecommunications Resources, Inc.		Case Number: 02-51141 - jwv Cred. ID: 10060752				
NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A "request" for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.						
Name of Creditor: <i>(The person or other entity to whom the debtor owes money or property)</i> Florida Public Service Commission Name and Address Where Notices Should be Sent Florida Public Service Commission 2540 Shumard Oak Blvd. Tallahassee FL 32399-7019 Telephone No		<input type="checkbox"/> Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check box if you have never received any notices from the bankruptcy court in this case. <input type="checkbox"/> Check box if address differs from the address on the envelope sent to you by the court.		Chapter 11		
ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR:		Check here if this claim <input type="checkbox"/> replaces <input type="checkbox"/> amends a previously filed claim, dated : _____				
1. BASIS FOR CLAIM: <table style="width:100%; border: none;"> <tr> <td style="width:50%; border: none;"> <input type="checkbox"/> Goods sold <input type="checkbox"/> Services performed <input type="checkbox"/> Money loaned <input type="checkbox"/> Personal injury/wrongful death <input type="checkbox"/> Taxes <input type="checkbox"/> Other (describe briefly): </td> <td style="width:50%; border: none;"> <input type="checkbox"/> Retiree benefits as defined in 11 U.S.C. § 1114(a) <input type="checkbox"/> Wages, salaries, and compensation (fill out below) Your social security number _____ Unpaid compensation for services performed from _____ to _____ (date) (date) </td> </tr> </table>				<input type="checkbox"/> Goods sold <input type="checkbox"/> Services performed <input type="checkbox"/> Money loaned <input type="checkbox"/> Personal injury/wrongful death <input type="checkbox"/> Taxes <input type="checkbox"/> Other (describe briefly):	<input type="checkbox"/> Retiree benefits as defined in 11 U.S.C. § 1114(a) <input type="checkbox"/> Wages, salaries, and compensation (fill out below) Your social security number _____ Unpaid compensation for services performed from _____ to _____ (date) (date)	
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2. DATE DEBT WAS INCURRED		3. IF COURT JUDGMENT, DATE OBTAINED:				
4. CLASSIFICATION OF CLAIM. Under the Bankruptcy Code all claims are classified as one or more of the following: (1) Unsecured nonpriority, (2) Unsecured Priority, (3) Secured. It is possible for part of a claim to be in one category and part in another. CHECK THE APPROPRIATE BOX OR BOXES below that best describe your claim and STATE THE AMOUNT OF THE CLAIM AT TIME CASE FILED.						
<input type="checkbox"/> SECURED CLAIM \$ _____ Attach evidence of perfection of security interest. Brief Description of Collateral: <input checked="" type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other (Describe briefly): -FMV of Collateral \$ _____ Amount of arrearage and other charges at time case filed included in secured claim above, if any \$ _____		Specify the priority of the claim. <input type="checkbox"/> Wages, salaries, or commissions up to \$4650*, earned not more than 90 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier—11 U.S.C. § 507(a)(3) <input type="checkbox"/> Contributions to an employee benefit plan—11 U.S.C. § 507(a)(4) <input type="checkbox"/> Up to \$2,100* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use—11 U.S.C. § (507)(a)(6) <input type="checkbox"/> Alimony, maintenance, or support owed to a spouse, former spouse, or child—11 U.S.C. § 507(a)(7) <input type="checkbox"/> Taxes or penalties of governmental units—11 U.S.C. § 507(a)(8) <input type="checkbox"/> Other—Specify applicable paragraph of 11 U.S.C. § 507(a) *Amounts are subject to adjustment on 4/1/04 and every 3 years thereafter with respect to cases commenced on or after date of adjustment.				
<input type="checkbox"/> UNSECURED NONPRIORITY CLAIM \$ _____ A claim is unsecured if there is no collateral or lien on property of the debtor securing the claim or to the extent that the value of such property is less than the amount of the claim.						
<input type="checkbox"/> UNSECURED PRIORITY CLAIM \$ _____						
5. TOTAL AMOUNT OF CLAIM AT TIME CASE FILED:		\$ _____ (Unsecured) \$ _____ (Secured) \$ _____ (Priority)		\$ _____ (Total)		
<input type="checkbox"/> Check this box if claim includes charges in addition to the principal amount of the claim. Attach itemized statement of all additional charges.						
6. CREDITS AND SETOFFS. The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim. In filing this claim, claimant has deducted all amounts that claimant owes to debtor.				THIS SPACE IS FOR COURT USE ONLY		
7. SUPPORTING DOCUMENTS. Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, or evidence of security interests to original and each copy. If the documents are not available, explain. If the documents are voluminous, attach a summary.						
8. DATE-STAMPED COPY. To receive an acknowledgement of the filing of your claim, enclose a stamped, self-addressed envelope and additional copy of this proof of claim. (Original and two copies total)						
DATE:		Sign and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any):				

PENALTY for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

SUN-39207 0866-4 B9F 02-51141
Larry E. Parres
Lewis, Rice & Fingersh
500 N. Broadway, Ste 2000
St. Louis, MO 63102

023944 23944 1 AB 0.301 32399 5 7 3796-1-24112



Florida Public Service Commission
2540 Shumard Oak Blvd.
Tallahassee FL 32399-7019

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DISTRIBUTION CENTER