

United States Bankruptcy Court
Southern District of New York

Voluntary Petition

Name of Debtor (if individual, enter Last, First, Middle):
Saint Vincents Catholic Medical Centers of New York

All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):
**Saint Vincent Catholic Medical Centers
SVCMC Home Health Agency**

Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN.
(if more than one, state all): **13-4077996**

Street Address of Debtor (No. and Street, City, and State):
**153 W. 11th Street
New York, New York**
ZIP CODE **10011**

County of Residence or of the Principal Place of Business:
New York

Mailing Address of Debtor (if different from street address):
**170 W. 12th Street, Smith 5th Floor
New York, New York**
ZIP CODE **10011**

Name of Joint Debtor (Spouse) (Last, First, Middle):

All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):

Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all):

Street Address of Joint Debtor (No. and Street, City, and State):
ZIP CODE

County of Residence or of the Principal Place of Business:

Mailing Address of Joint Debtor (if different from street address):
ZIP CODE

Location of Principal Assets of Business Debtor (if different from street address above):
ZIP CODE

| | | |
|--|--|--|
| <p>Type of Debtor (Form of Organization) (Check one box.)</p> <p><input type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i></p> <p><input checked="" type="checkbox"/> Corporation (includes LLC and LLP)</p> <p><input type="checkbox"/> Partnership</p> <p><input type="checkbox"/> Other (if debtor is not one of the above entities, check this box and state type of entity below.)</p> | <p>Nature of Business (Check one box.)</p> <p><input checked="" type="checkbox"/> Health Care Business</p> <p><input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B)</p> <p><input type="checkbox"/> Railroad</p> <p><input type="checkbox"/> Stockbroker</p> <p><input type="checkbox"/> Commodity Broker</p> <p><input type="checkbox"/> Clearing Bank</p> <p><input type="checkbox"/> Other</p> <p>Tax-Exempt Entity (Check box, if applicable.)</p> <p><input checked="" type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).</p> | <p>Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box.)</p> <p><input type="checkbox"/> Chapter 7</p> <p><input type="checkbox"/> Chapter 9</p> <p><input checked="" type="checkbox"/> Chapter 11</p> <p><input type="checkbox"/> Chapter 12</p> <p><input type="checkbox"/> Chapter 13</p> <p><input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding</p> <p><input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding</p> <p>Nature of Debts (Check one box.)</p> <p><input type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."</p> <p><input checked="" type="checkbox"/> Debts are primarily business debts</p> |
|--|--|--|

Filing Fee (Check one box.)

Full Filing Fee attached.

Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A.

Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.

Chapter 11 Debtors

Check one box:

Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D).

Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).

Check if:

Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,343,300 (amount subject to adjustment on 4/01/13 and every three years thereafter).

Check all applicable boxes:

A plan is being filed with this petition.

Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).

Statistical/Administrative Information (Information listed on a consolidated basis with affiliated debtors)

Debtor estimates that funds will be available for distribution to unsecured creditors.

Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.

Estimated Number of Creditors

| | | | | | | | | | |
|-------------------------------|--------------------------------|----------------------------------|----------------------------------|--------------------------------------|---------------------------------------|--|---|---|---------------------------------------|
| <input type="checkbox"/> 1-49 | <input type="checkbox"/> 50-99 | <input type="checkbox"/> 100-199 | <input type="checkbox"/> 200-999 | <input type="checkbox"/> 1,000-5,000 | <input type="checkbox"/> 5,001-10,000 | <input type="checkbox"/> 10,001-25,000 | <input checked="" type="checkbox"/> 25,001-50,000 | <input type="checkbox"/> 50,001-100,000 | <input type="checkbox"/> Over 100,000 |
|-------------------------------|--------------------------------|----------------------------------|----------------------------------|--------------------------------------|---------------------------------------|--|---|---|---------------------------------------|

Estimated Assets

| | | | | | | | | | |
|--|--|---|---|--|---|--|--|---|--|
| <input type="checkbox"/> \$0 to \$50,000 | <input type="checkbox"/> \$50,001 to \$100,000 | <input type="checkbox"/> \$100,001 to \$500,000 | <input type="checkbox"/> \$500,001 to \$1 million | <input type="checkbox"/> \$1,000,001 to \$10 million | <input type="checkbox"/> \$10,000,001 to \$50 million | <input type="checkbox"/> \$50,000,001 to \$100 million | <input checked="" type="checkbox"/> \$100,000,001 to \$500 million | <input type="checkbox"/> \$500,000,001 to \$1 billion | <input type="checkbox"/> More than \$1 billion |
|--|--|---|---|--|---|--|--|---|--|

Estimated Liabilities

| | | | | | | | | | |
|--|--|---|---|--|---|--|---|---|---|
| <input type="checkbox"/> \$0 to \$50,000 | <input type="checkbox"/> \$50,001 to \$100,000 | <input type="checkbox"/> \$100,001 to \$500,000 | <input type="checkbox"/> \$500,001 to \$1 million | <input type="checkbox"/> \$1,000,001 to \$10 million | <input type="checkbox"/> \$10,000,001 to \$50 million | <input type="checkbox"/> \$50,000,001 to \$100 million | <input type="checkbox"/> \$100,000,001 to \$500 million | <input type="checkbox"/> \$500,000,001 to \$1 billion | <input checked="" type="checkbox"/> More than \$1 billion |
|--|--|---|---|--|---|--|---|---|---|

THIS SPACE IS FOR COURT USE ONLY

| | |
|--|--|
| Voluntary Petition <i>(This page must be completed and filed in every case.)</i> | Name of Debtor(s): Saint Vincents Catholic Medical Centers of New York |
|--|--|

All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet.)

| | | |
|--|--------------|-------------|
| Location Where Filed: See attached Annex 1 | Case Number: | Date Filed: |
| Location Where Filed: | Case Number: | Date Filed: |

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

| | | |
|--|---------------|-------------|
| Name of Debtor: See Attached Annex 2 | Case Number: | Date Filed: |
| District: | Relationship: | Judge: |

Exhibit A

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

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

Exhibit B

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

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

X _____
 Signature of Attorney for Debtor(s) (Date)

Exhibit C

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

- Yes, and Exhibit C is attached and made a part of this petition.
- No.

Exhibit D

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

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

If this is a joint petition:

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

Information Regarding the Debtor - Venue
 (Check any applicable box.)

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

Certification by a Debtor Who Resides as a Tenant of Residential Property
 (Check all applicable boxes.)

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

 (Name of landlord that obtained judgment)

 (Address of landlord)

- Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and
- Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.
- Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

Voluntary Petition

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

Name of Debtor(s):

Saint Vincents Catholic Medical Centers of New York

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).

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

X _____
Signature of Debtor

X _____
Signature of Joint Debtor

Telephone Number (if not represented by attorney)

Date

Signature of a Foreign Representative

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

(Check only one box.)

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

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

X _____
(Signature of Foreign Representative)

(Printed Name of Foreign Representative)

Date

Signature of Attorney*

X _____
Signature of Attorney for Debtor(s)

Adam C. Rogoff, Esq.

Printed Name of Attorney for Debtor(s)

Kramer Levin Naftalis & Frankel LLP

Firm Name

1177 Avenue of the Americas

Address

New York, NY 10036-2714

(212) 715-9100

Telephone Number

April 14 2010

Date

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

Signature of Debtor (Corporation/Partnership)

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

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

X M. E. Toney
Signature of Authorized Individual

Mark E. Toney

Printed Name of Authorized Individual

Chief Restructuring Officer of Saint Vincents Catholic

Medical Centers of New York

Title of Authorized Individual

April 14 2010

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

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

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

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

Address

X _____
Date

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social-Security number is provided above.

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

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

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

Annex 1

List of Prior Bankruptcy Cases and Cases Jointly Administered Therewith¹

| Debtor | Case # | Date Filed | District |
|--|---------------|-------------------|-----------------|
| Saint Vincents Catholic Medical Centers of New York d/b/a Saint Vincent Catholic Medical Centers | 05-14945 | 07/05/2005 | SDNY |
| Surgical Service of St. Vincent's, P.C. | 05-14946 | 07/05/2005 | SDNY |
| Medical Service of St. Vincent's Hospital and Medical Center, P.C. | 05-14947 | 07/05/2005 | SDNY |
| CMC Cardiology Services P.C. | 05-14948 | 07/05/2005 | SDNY |
| CMC Radiological Services P.C. | 05-14949 | 07/05/2005 | SDNY |
| CMC Occupational Health Services P.C. | 05-14950 | 07/05/2005 | SDNY |
| CMC Physician Services, P.C. | 05-14951 | 07/05/2005 | SDNY |

¹ Saint Vincent Catholic Medical Centers of New York, Surgical Service of St. Vincent's P.C., Medical Service of St. Vincent's Hospital and Medical Center, P.C., CMC Cardiology Services, P.C., CMC Radiological Services, P.C., CMC Occupational Health Services P.C., and CMC Physician Services, P.C. filed voluntary petitions for chapter 11 protection under title 11 of the United States Bankruptcy Code on July 5, 2005 in the Southern District of New York. Only three of the above listed entities are current debtors. The case was assigned to the Honorable Prudence Carter Beatty. On January 11, 2006, the case was transferred to the Honorable Adlai S. Hardin, Jr., where the case was administered for over three years. The prior chapter 11 plan was confirmed in July 2007. Subsequently, Judge Hardin retired, and the case was transferred to the Honorable Cecilia G. Morris on April 27, 2009.

Annex 2

Affiliated Debtors

On the date hereof, each of the entities listed below also filed a voluntary petition for relief under Chapter 11 of title 11 of the United States Code (the "Bankruptcy Code") in the United States Bankruptcy Court for the Southern District of New York. For ease sake, the below list also includes this Debtor. All other entities are affiliates of the Debtor. Such entities have filed or shortly will file a motion requesting that their Chapter 11 cases be consolidated for procedural purposes only and jointly administered.

| Company Name | Case No. |
|--|----------|
| 555 6th Avenue Apartment Operating Corporation | 10- () |
| Bishop Francis J. Mugavero Center for Geriatric Care, Inc. | 10- () |
| Chait Housing Development Corporation | 10- () |
| Fort Place Housing Corporation | 10- () |
| SVCMC Professional Registry, Inc. | 10- () |
| Pax Christi Hospice, Inc. | 10- () |
| Saint Vincents Catholic Medical Centers of New York d/b/a Saint Vincent Catholic Medical Centers d/b/a SVCMC Home Health Agency | 10- () |
| Sisters of Charity Health Care System Nursing Home, Inc. d/b/a St. Elizabeth Ann's Health Care & Rehabilitation Center | 10- () |
| St. Jerome's Health Services Corporation d/b/a Holy Family Home | 10- () |

**OFFICER'S CERTIFICATE OF
RESOLUTION OF THE BOARD OF DIRECTORS OF
SAINT VINCENTS CATHOLIC MEDICAL CENTERS OF NEW YORK**

The undersigned, a duly authorized officer of Saint Vincents Catholic Medical Centers of New York, a New York not-for-profit corporation ("**SVCMC**"), together with its debtor affiliates, (the "**Medical Center Entities**"), hereby certifies that the following resolutions were duly adopted by not less than two-thirds of its entire board of directors at a meeting duly called and held, and at which a quorum was present and acting throughout on April 13, 2010 (the "**Board of Directors**") in accordance with the requirements of applicable New York law and that said resolutions have not been modified or rescinded and are still in full force and effect on the date hereof:

WHEREAS, the Board of Directors has considered the financial and operational aspects of SVCMC's businesses; and

WHEREAS, the Board of Directors has reviewed the historical performance of SVCMC and the Medical Centers, the current market for the Medical Centers' services, and the current and long-term liabilities of SVCMC and the Medical Centers; and

WHEREAS, the Board of Directors has given serious and extensive consideration to all options reasonably available to SVCMC and the Medical Centers at numerous regular and special meetings; and

WHEREAS, consistent with its fiduciary duties, the Board of Directors of SVCMC and the boards of directors of certain wholly owned subsidiaries and related organizations of SVCMC (collectively, the "**Subsidiaries**") have determined that it is desirable and in the best interests of each of SVCMC and the Medical Center Entities, their respective creditors, stockholders, employees and other interested parties, including their patients, that voluntary petitions be filed by each of the Medical Center Entities seeking relief under the provisions of Chapter 11 of Title 11 of the United States Code (the "**Bankruptcy Code**").

NOW, THEREFORE, BE IT RESOLVED, by the Board of Directors, acting on behalf of SVCMC, as the sole shareholder or member (as applicable) of the Medical Center Entities, that SVCMC file, and upon separately executed and approved resolutions by their respective Boards of Directors, that each of the Subsidiaries shall file petitions in bankruptcy under Chapter 11 of the Bankruptcy Code and cause the same to be filed in the United States Bankruptcy Court for the Southern District of New York (the "**Bankruptcy Court**"); and be it further

RESOLVED, that each of the Authorized Persons, as shall be appointed herein, be and hereby is, authorized and directed to retain Grant Thornton LLP to serve as the Crisis Management team and to employ the services of its Partner, Mark E. Toney, as Chief Restructuring Officer ("**CRO**") of SVCMC in connection with the Chapter 11 cases and for all other relevant purposes; and be it further

RESOLVED, that Steven R. Korf the CFO, and Mark E. Toney, the CRO, or any other person designated by the CFO and/or CRO of SVCMC (each such officer or designee being an "**Authorized Person**" and all being the "**Authorized Persons**") be, and each hereby is, authorized, empowered and directed, in the name and on behalf of SVCMC, to execute and verify petitions under Chapter 11 of the Bankruptcy Code with respect to SVCMC and each of the Medical Center Entities and to cause the same to be filed in the Bankruptcy Court at such time as the Authorized Person executing such petitions shall determine; and be it further

RESOLVED, that each Authorized Person be, and hereby is, authorized, empowered and directed, in the name and on behalf of SVCMC, including in its capacity as sole shareholder of the Subsidiaries, to execute and file all schedules, motions, lists, applications, pleadings and other papers, and to take and perform any and all further acts and deeds which he or she deems necessary, proper or desirable in connection with the Chapter 11 cases of SVCMC and/or the Medical Center Entities', with a view to the successful prosecution of such cases; and be it further

RESOLVED, that each of the Authorized Persons be, and hereby is, authorized, directed and empowered to retain, in the name of SVCMC (i) under a general retainer, the law firm of Kramer Levin Naftalis & Frankel LLP to serve as bankruptcy counsel and render legal services in connection with their Chapter 11 case and other related matters to be determined by an Authorized Person; (ii) under a general retainer, the law firm of Garfunkel Wild, P.C. to serve as special counsel and render regulatory, healthcare, corporate, real estate, litigation and finance advice in connection with their Chapter 11 cases and other related matters to be determined by an Authorized Person; and to execute appropriate retention agreements, pay appropriate retainers prior to and immediately upon filing of the Chapter 11 cases, and to cause to be filed appropriate retention applications with the Bankruptcy Court; and be it further

RESOLVED, that each of the Authorized Persons be, and hereby is, authorized, empowered and directed to engage and retain any other assistance by legal counsel, accountants, financial advisors, restructuring advisors and other professionals as are deemed necessary to represent and assist SVCMC in carrying out their duties under Title 11 of the United States Code, and in connection therewith, each Authorized Persons is hereby authorized and directed to execute appropriate retention agreements, pay appropriate retainers prior to and immediately upon filing of the Chapter 11 cases, and to cause to be filed an appropriate application for authority to retain the services of such firms; and be it further

RESOLVED, that in connection with the commencement of the Chapter 11 case, each Authorized Person is, authorized and empowered on behalf and in the name of SVCMC, including in its capacity as sole shareholder or member (as the case may be) of the Subsidiaries, to obtain postpetition financing and to incur indebtedness according to terms negotiated, or to be negotiated by the Authorized Persons, including agreements related to use of cash collateral and debtor-in-possession credit facilities; and to enter into guarantees and to pledge and grant liens on its assets and mortgages on its properties as may be contemplated by or required under the terms of such cash collateral agreements or postpetition financing; to establish, and enter into control agreements with respect to, bank accounts at such financial institutions as may be useful or necessary, and as may be determined by such Authorized Persons in connection with such debtor-in-possession credit facilities; and in connection therewith, the Authorized Persons are hereby authorized and directed to execute appropriate loan agreements, cash collateral agreements and related ancillary documents and to pay all fees required in connection with such postpetition financing as may be required by the lenders thereof; and be it further

RESOLVED, that each of the Authorized Persons, be and hereby is, authorized, empowered and directed, in the name and on behalf of SVCMC, including in its capacity as sole shareholder of the Subsidiaries, to cause SVCMC and/or the Medical Center Entities to enter into, execute, deliver, certify, file and/or record, and perform, such agreements, instruments, motions, affidavits, applications for approvals or ruling of governmental or regulatory authorities, certificates or other documents, and to take such other action in the Medical Center Entities' Chapter 11 cases, as in the judgment of such Authorized Person shall be or become necessary, proper and desirable to effectuate a successful reorganization of SVCMC and/or the Medical Center Entities' business, including but not limited to, the orderly sale of SVCMC and/or the Medical Center Entities' non-core assets and the negotiation and formulation of a plan of reorganization and all related documents thereto on behalf of SVCMC and/or the Medical Center Entities; and be it further

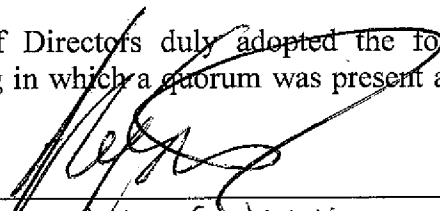
RESOLVED that nothing herein changes the requirement that the Authorized Persons seek prior approval from the Board of Directors for any transaction not specifically approved hereby for which the corporation's rules require such approval from the Board of Directors; and be it further

RESOLVED, that any and all actions heretofore taken by any officers or directors of SVCMC in the name and on behalf of SVCMC and/or Medical Center Entities, including in its capacity as sole shareholder of the Subsidiaries, in furtherance of any or all of the preceding resolutions are ratified, confirmed and approved; and be it further

RESOLVED, that each of the Authorized Persons, be and hereby is, authorized to take any of the following actions on behalf of SVCMC, including in its capacity as sole shareholder of the Subsidiaries: (i) negotiate, execute, deliver

and/or file any and all of the agreements, documents and instruments referenced herein, and such other agreements, documents and instruments as may be required or as such Authorized Persons deem appropriate or advisable, or to cause the negotiation, execution and delivery thereof, in the name and on behalf of SVCMC and/or its Subsidiaries, as the case may be, in such form and substance as such Authorized Persons may approve, with the execution and delivery thereof on behalf of SVCMC and/or its Subsidiaries, as the case may be, by or at the direction of an Authorized Person to constitute evidence of such approval, (ii) negotiate, execute, deliver and/or file, in the name and on behalf of SVCMC and/or its subsidiaries, as the case may be, any and all agreements, documents, certificates, consents, motions, applications, and other filings relating to the resolutions adopted and matters ratified or approved hereby and the transactions contemplated thereby, and amendments and supplements to any of the foregoing, and to take such other actions as may be required or as such Authorized Persons deem appropriate or advisable in connection therewith including, without limitation, voting any shares or interests held by SVCMC and/or its subsidiaries and (iii) doing such other things as may be required, or as may in their judgment be appropriate or advisable, in order to effectuate fully the resolutions adopted and matters ratified or approved hereby and the consummation of the transactions contemplated thereby.

The undersigned hereby certifies that the Board of Directors duly adopted the foregoing resolutions on the 13th day of April, 2010 at a meeting in which a quorum was present and that such resolutions are in full force and effect.


Name: Alfred Smith IV
Title: Chairman
Date: 4/13/10

Schedule A-2

Consolidated List of Holders of the 30 Largest Unsecured Claims

Contemporaneously with the filing of their petitions, the Debtors filed a motion requesting, among other things, authority to file a consolidated list of the 30 largest unsecured creditors (the “**Top 30 List**”) in lieu of separate lists of each Debtor’s 20 largest unsecured creditors. Attached hereto is the Top 30 List which is based on the Debtors’ books and records as of approximately April 13, 2010. The Top 30 List was prepared in accordance with Fed. R. Bankr. P. 1007(d) for filing in the Debtors’ Chapter 11 Cases. The Top 30 List does not include: (1) persons who come within the definition of “insider” set forth in 11 U.S.C. § 101; or (2) secured creditors, unless the value of the collateral is such that the unsecured deficiency places the creditor among the holders of the 30 largest unsecured claims. The Top 30 List is provided pursuant to Local Rule 1007-2(a)(4).

The information contained shall not constitute an admission of liability by, nor is it binding, on the Debtors. The Debtors reserve all rights to assert that any debt or claim listed herein is a disputed claim or debt, and to challenge the priority, nature, amount or status of any such claim or debt. In the event of any inconsistencies between the summaries set forth below and the respective corporate and legal documents relating to such obligations, the descriptions in the corporate and legal documents shall control.

| (1) | (2) | (3) | (4) | (5) |
|--|--|---|--|--|
| <i>Name of creditor and complete mailing address, including zip code</i> | <i>Name, telephone number and complete mailing address, including zip code, of employee, agent or department of creditor familiar with claim who may be contacted</i> | <i>Nature of claim (trade debt, bank loan, government contract, etc.)</i> | <i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff¹</i> | <i>Amount of claim (if secured also state value of security)</i> |
| Pension Benefit Guaranty Corporation Office of the General Counsel Suite 340 1200 K Street, N.W. Washington, DC 20005-4026 | Pension Benefit Guaranty Corporation Attn: Brad Rogers, Esq. Office of the General Counsel Suite 340 1200 K Street, N.W. Washington, DC 20005-4026 Telephone: (202) 326-4020 ext. 3029 Facsimile: (202) 326-4112 | Government | Contingent; unliquidated | \$180,000,000 (estimated) |

¹ All claims may be subject to offsets, discounts, reconciliations, credits, and adjustments, which are not reflected on this list.

| (1) | (2) | (3) | (4) | (5) |
|--|--|---|--|--|
| <i>Name of creditor and complete mailing address, including zip code</i> | <i>Name, telephone number and complete mailing address, including zip code, of employee, agent or department of creditor familiar with claim who may be contacted</i> | <i>Nature of claim (trade debt, bank loan, government contract, etc.)</i> | <i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff^A</i> | <i>Amount of claim (if secured also state value of security)</i> |
| <p>Michael E. Katzenstein, MedMal Trust Monitor for MedMal Trust-BQ; MedMal Trust-MW; and MedMal Trust- SI 5956 Cherry Lane, Suite 1000 Dallas, TX 75225</p> <p>c/o:</p> <p>Cooley Godward Kronish LLP The Grace Building 1114 Avenue of the Americas New York, NY 10036</p> | <p>Michael E. Katzenstein, MedMal Trust Monitor for MedMal Trust-BQ; MedMal Trust-MW; and MedMal Trust- SI 5956 Cherry Lane, Suite 1000 Dallas, TX 75225 Facsimile: 214-451-6999 E-Mail: mike@cxollc.com</p> <p>c/o:</p> <p>Cooley Godward Kronish LLP Attn: Richard Kanowitz The Grace Building 1114 Avenue of the Americas New York, NY 10036 Facsimile: (212) 479-6275 E-mail: rkanowitz@cooley.com</p> | Lien | Contingent | \$113,000,000 |
| <p>Aptium Oncology 8201 Beverly Boulevard Los Angeles, CA 90048-4505</p> | <p>Aptium Oncology Attn: Peter J. Rogers Chief Financial Officer 8201 Beverly Boulevard Los Angeles, CA 90048-4505 Telephone: (323) 966-3493 Facsimile: (323) 966-3444 E-mail: progers@aptiumoncology.com</p> | Trade | | \$6,453,089.00 |
| <p>Office of the State Comptroller Office of Unclaimed Funds 110 State Street Albany, New York 12236</p> | <p>Office of the State Comptroller Office of Unclaimed Funds 110 State Street Albany, New York 12236 Telephone: (800) 221-9311 Fax: (212) 383-4956</p> | Government | Contingent | \$4,017,038.34 |

| (1) | (2) | (3) | (4) | (5) |
|--|--|---|--|--|
| <i>Name of creditor and complete mailing address, including zip code</i> | <i>Name, telephone number and complete mailing address, including zip code, of employee, agent or department of creditor familiar with claim who may be contacted</i> | <i>Nature of claim (trade debt, bank loan, government contract, etc.)</i> | <i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff^a</i> | <i>Amount of claim (if secured also state value of security)</i> |
| <p>Grove Pointe Urban Renewal, LLC Attn: Jonathan Kushner 520 Route 22 PO Box 6872 Bridgewater, NJ 08807</p> | <p>Grove Pointe Urban Renewal, LLC Attn: Jonathan Kushner 520 Route 22 PO Box 6872 Bridgewater, NJ 08807 Telephone: (908) 725-8100 Fax: (908) 575-2237 Email: jk@skpropertiesre.com</p> | <p>Landlord</p> | <p>Disputed</p> | <p>\$4,653,770</p> |
| <p>Local 1199 Benefit Fund 330 W. 42nd Street 27th Floor New York, NY 10036</p> | <p>Local 1199 Benefit Fund 330 W. 42nd Street 27th Floor New York, NY 10036 Attn: Finance Dept. Telephone: (212) 582-1890 Facsimile: (212) 767-1732</p> | <p>Union</p> | | <p>\$3,696,513.26</p> |
| <p>Nursing Personnel HomeCare 175 South 9th Street Brooklyn, NY 11211</p> | <p>Nursing Personnel HomeCare 175 South 9th Street Brooklyn, NY 11211 Attn: Moses Schleslinger Telephone: (516) 377-9503 Fax: (866) 590-9866</p> | <p>Trade</p> | | <p>\$2,744,816.45</p> |
| <p>BestCare Inc. 3000 Hempstead Turnpike Levittown, NY 11756</p> | <p>BestCare Inc. Legal Department 3000 Hempstead Turnpike Levittown, NY 11756 Attn: Bernard Schiel Telephone: (516) 731-3770 Fax: (516) 731-9271</p> | <p>Trade</p> | | <p>\$2,606,170.91</p> |
| <p>Siemens Medical Solutions USA 51 Valley Stream Parkway Malverne, PA 19355</p> | <p>Siemens Medical Solutions USA 51 Valley Stream Parkway Malverne, PA 19355 Attn: Olga Richter Telephone: (203) 722-0504 Fax: (610) 219-3124</p> | <p>Trade</p> | | <p>\$2,536,875.63</p> |

| (1) | (2) | (3) | (4) | (5) |
|---|---|---|--|--|
| <i>Name of creditor and complete mailing address, including zip code</i> | <i>Name, telephone number and complete mailing address, including zip code, of employee, agent or department of creditor familiar with claim who may be contacted</i> | <i>Nature of claim (trade debt, bank loan, government contract, etc.)</i> | <i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff^A</i> | <i>Amount of claim (if secured also state value of security)</i> |
| Access Nursing Services 411 Manville Road Pleasantville, NY 10570 | Access Nursing Services 411 Manville Road Pleasantville, NY 10570 Attn: Louise Weadock Telephone: (914) 747-9696 Fax: (914) 747-7577 | Trade | | \$1,928,347.79 |
| Cardinal Health Medical Products and Services 7000 Cardinal Place Dublin, OH 43017 | Cardinal Health Medical Products and Services Legal Department 7000 Cardinal Place Dublin, OH 43017 Telephone: Fax: (732) 417-4777 | Trade | | \$1,881,718.56 |
| Special Touch Home Care Service 2091 Coney Island Avenue Brooklyn, NY 11223 | Special Touch Home Care Service 2091 Coney Island Avenue Brooklyn, NY 11223 Attn: Linda Keehn Telephone: (718) 627-1122 Fax: (718) 627-0606 | Trade | | \$1,879,940.90 |
| Verizon 220 East 42nd Street New York, NY 10017 | Verizon 140 West Street New York, NY 10007 Telephone: (212) 395-1000 Fax: (212) 571-1897 | Utilities | | \$1,851,899.00 |
| Command Security Corp. Legal Department Lexington Park Route 55 Lagrangeville, NY 12540 | Command Security Corp. Legal Department Lexington Park Route 55 Suite D Lagrangeville, NY 12540 Telephone: (845) 454-3703 Fax: (845) 454-0075 | Trade | | \$1,174,326.53 |
| Local 1199 Pension Fund 330 W. 42nd Street 27th Floor New York, NY 10036 | Local 1199 Pension Fund 330 W. 42nd Street 27th Floor New York, NY 10036 Attn: Finance Dept. Telephone: (212) 582-1890 Facsimile: (212) 767-1732 | Union | | \$1,043,642.50 |

| (1) | (2) | (3) | (4) | (5) |
|---|---|---|--|--|
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| Boston Scientific SCIMED One Scimed Place Maple Grove, MN 55311-1566 | Boston Scientific SCIMED Legal Department One Scimed Place Maple Grove, MN 55311-1566 Telephone: (800) 832-7822 Fax: (800) 782-1357 | Trade | | \$927,280.10 |
| Renal Research Institute LLC 207 East 94th Street New York, NY 10128 | Renal Research Institute LLC 207 East 94th Street New York, NY 10128 Attn: John Callegari Telephone: (212) 360-6579 Fax: (212) 360-7233 | Trade | | \$905,325.00 |
| Con Edison CAG 9th Floor 4 Irving Place New York, NY 10003 | Con Edison CAG 9th Floor 4 Irving Place New York, NY 10003 Telephone: (212) 677-9686 Fax: (212) 982-7816 | Utilities | | \$887,892.28 |
| NYSNA Benefits 1 Pine West Building Albany, NY 12205 | NYSNA Benefits 1 Pine West Building Albany, NY 12205 Telephone: (518) 443-2700 Facsimile: (518) 432-2773 | Union | | \$783,792.43 |
| I &Y Senior Care 1991 Flatbush Avenue 2nd Floor Brooklyn, NY 11234 | I &Y Senior Care 1991 Flatbush Avenue 2nd Floor Brooklyn, NY 11234 Attn: Lana Kucher Telephone: (718) 253-0077 Fax: (728) 253-0071 | Trade | | \$734,213.47 |
| Hope Home Care Inc. 71 New Dorp Plaza Staten Island, NY 10306 | Hope Home Care Inc. 71 New Dorp Plaza Staten Island, NY 10306 Attn: Brent Alexander Telephone: (718) 667-8510 Fax: (718) 667-4524 Fax: (718) 667-8884 | Trade | | \$720,213.64 |

| (1) | (2) | (3) | (4) | (5) |
|---|---|---|--|--|
| <i>Name of creditor and complete mailing address, including zip code</i> | <i>Name, telephone number and complete mailing address, including zip code, of employee, agent or department of creditor familiar with claim who may be contacted</i> | <i>Nature of claim (trade debt, bank loan, government contract, etc.)</i> | <i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff^A</i> | <i>Amount of claim (if secured also state value of security)</i> |
| 450 Partners LLC Legal Department 450W 33rd Street New York, NY 10001 | 450 Partners LLC Legal Department 450W 33rd Street New York, NY 10001 Telephone: (212) 947-7887 Fax: (212) 947-8659 | Trade | | \$672,190.95 |
| Utopia Home Care Inc. 60 East Main Street Kings Park, NY 11754 | Utopia Home Care Inc. 60 East Main Street Kings Park, NY 11754 Attn: Manuel Martinez Telephone: (631) 544-0462 Facsimile: (631) 544-5141 | Trade | | \$650,969.57 |
| FedCap Home Care Legal Department 211 W. 14th Street New York, NY 10011 | FedCap Home Care Legal Department 211 W. 14th Street New York, NY 10011 Telephone: (212) 727-3400 Fax: (212) 727-4374 | Trade | | \$641,074.20 |
| SelfHelp Community Services Legal Department 520 Eighth Avenue New York, NY 10018 | SelfHelp Community Services Legal Department 520 Eighth Avenue New York, NY 10018 Telephone: (212) 971-7600 Fax: (212) 695-0941 | Trade | | \$591,543.96 |
| New York Dialysis Services Legal Department 2615-21 Frederick Douglas Blvd. New York, NY 10030 | New York Dialysis Services Legal Department 2615-21 Frederick Douglas Blvd. New York, NY 10030 Telephone: (212) 281-8200 Fax: (212) 690-7265 | Trade | | \$570,825.00 |
| Allen Health Care Services 175-20 Hillside Avenue 2nd Floor Jamaica, NY 11432 | Allen Health Care Services 175-20 Hillside Avenue 2nd Floor Jamaica, NY 11432 Attn: Marie Anreacchio Telephone: (718) 657-2966 Fax: (718) 291-5987 | Trade | | \$569,342.09 |

| (1) <i>Name of creditor and complete mailing address, including zip code</i> | (2) <i>Name, telephone number and complete mailing address, including zip code, of employee, agent or department of creditor familiar with claim who may be contacted</i> | (3) <i>Nature of claim (trade debt, bank loan, government contract, etc.)</i> | (4) <i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff^A</i> | (5) <i>Amount of claim (if secured also state value of security)</i> |
|--|--|--|---|---|
| Biomet Inc. Legal Department 56 East Bell Drive PO Box Warsaw, IN 46581-0587 | Biomet Inc. Legal Department 56 East Bell Drive PO Box Warsaw, IN 46581-0587 Telephone: (574) 267-6639 Fascimile: (574) 267-8137 | Trade | | \$526,376.93 |
| Sodexo Operations LLC Legal Department 9801 Washington Blvd Gaithersburg, MD 20878-5355 | Sodexo Operations LLC Legal Department 9801 Washington Blvd Gaithersburg, MD 20878-5355 Telephone: (301) 987-4000 Facsimile: (301) 987-4499 | Trade | | \$525,233.75 |
| Aides at Home, Inc. 29 West Marie Street Hicksville, NY 11801 | Aides at Home, Inc. 29 West Marie Street Hicksville, NY 11801 Telephone: (516) 538-2176 Facsimile: (516) 931-4175 | Trade | | \$481,202.61 |