

Fill in this information to identify the case:

United States Bankruptcy Court for the:
 _____ District of VIRGIN ISLANDS
(State)

Case number (if known): _____ Chapter 7

Check if this is an amended filing

Official Form 205

Involuntary Petition Against a Non-Individual

12/15

Use this form to begin a bankruptcy case against a non-individual you allege to be a debtor subject to an involuntary case. If you want to begin a case against an individual, use the *Involuntary Petition Against an Individual* (Official Form 105). Be as complete and accurate as possible. If more space is needed, attach any additional sheets to this form. On the top of any additional pages, write debtor's name and case number (if known).

Part 1: Identify the Chapter of the Bankruptcy Code Under Which Petition Is Filed

1. Chapter of the Bankruptcy Code
- Check one:
- Chapter 7
- Chapter 11

Part 2: Identify the Debtor

2. Debtor's name TIBBAR ENERGY USVI, LLC

3. Other names you know the debtor has used in the last 8 years

"TIBBAR"

"TIBBAR ENERGY"

Include any assumed names, trade names, or doing business as names.

4. Debtor's federal Employer Identification Number (EIN)

Unknown

EIN _____

5. Debtor's address	Principal place of business	Mailing address, if different
	Number _____ Street _____ <u>(exact physical address unknown)</u> _____ <u>Christiansted</u> <u>VI</u> <u>00820</u> <small>City State ZIP Code</small>	Number _____ Street _____ <u>P.O. Box 21657</u> P.O. Box _____ <u>Christiansted</u> <u>VI</u> <u>00820</u> <small>City State ZIP Code</small>
	Location of principal assets, if different from principal place of business _____ <u>District of St. Croix</u> _____ <small>County</small>	Number _____ Street _____ _____ <u>Christiansted</u> <u>VI</u> <u>00820</u> <small>City State ZIP Code</small>

Rec'd JUDGE-SX 08/26/16 PM 04:40

Debtor Tibbar Energy USVI, LLC
Name

Case number (if known) _____

6. Debtor's website (URL) http://www.tibbarconstruction.com/usvi_biomass_faqs.html

7. Type of debtor
 Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))
 Partnership (excluding LLP)
 Other type of debtor. Specify: _____

8. Type of debtor's business
Check one:
 Health Care Business (as defined in 11 U.S.C. § 101(27A))
 Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
 Railroad (as defined in 11 U.S.C. § 101(44))
 Stockbroker (as defined in 11 U.S.C. § 101(53A))
 Commodity Broker (as defined in 11 U.S.C. § 101(6))
 Clearing Bank (as defined in 11 U.S.C. § 781(3))
 None of the types of business listed.
 Unknown type of business.

9. To the best of your knowledge, are any bankruptcy cases pending by or against any partner or affiliate of this debtor?
 No
 Yes. Debtor _____ Relationship _____
District _____ Date filed _____ Case number, if known _____
MM / DD / YYYY
Debtor _____ Relationship _____
District _____ Date filed _____ Case number, if known _____
MM / DD / YYYY

Part 3: Report About the Case

10. Venue
Check one:
 Over the last 180 days before the filing of this bankruptcy, the debtor had a domicile, principal place of business, or principal assets in this district longer than in any other district.
 A bankruptcy case concerning debtor's affiliates, general partner, or partnership is pending in this district.

11. Allegations
Each petitioner is eligible to file this petition under 11 U.S.C. § 303(b).
The debtor may be the subject of an involuntary case under 11 U.S.C. § 303(a).
At least one box must be checked:
 The debtor is generally not paying its debts as they become due, unless they are the subject of a bona fide dispute as to liability or amount.
 Within 120 days before the filing of this petition, a custodian, other than a trustee, receiver, or an agent appointed or authorized to take charge of less than substantially all of the property of the debtor for the purpose of enforcing a lien against such property, was appointed or took possession.

12. Has there been a transfer of any claim against the debtor by or to any petitioner?
 No
 Yes. Attach all documents that evidence the transfer and any statements required under Bankruptcy Rule 1003(a).

Debtor Tibbar Energy USVI, LLC
Name

Case number (if known) _____

13. Each petitioner's claim	Name of petitioner	Nature of petitioner's claim	Amount of the claim above the value of any lien
	<u>CDR MAGUIRE, INC.</u>	<u>Professional Services</u>	\$ <u>164,404.32</u>
	<u>SCHUSTER REVOCABLE TRUST</u>	<u>Landlord</u>	\$ <u>40,994.38</u>
	<u>St. Croix Survey and Engineering, LLC</u>	<u>Professional Services</u>	\$ <u>31,365.00</u>
	Total of petitioners' claims		\$ <u>236,763.70</u>

If more space is needed to list petitioners, attach additional sheets. Write the alleged debtor's name and the case number, if known, at the top of each sheet. Following the format of this form, set out the information required in Parts 3 and 4 of the form for each additional petitioning creditor, the petitioner's claim, the petitioner's representative, and the petitioner's attorney. Include the statement under penalty of perjury set out in Part 4 of the form, followed by each additional petitioner's (or representative's) signature, along with the signature of the petitioner's attorney.

Part 4: Request for Relief

WARNING – Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Petitioners request that an order for relief be entered against the debtor under the chapter of 11 U.S.C. specified in this petition. If a petitioning creditor is a corporation, attach the corporate ownership statement required by Bankruptcy Rule 1010(b). If any petitioner is a foreign representative appointed in a foreign proceeding, attach a certified copy of the order of the court granting recognition.

I have examined the information in this document and have a reasonable belief that the information is true and correct.

Petitioners or Petitioners' Representative

Attorneys

Name and mailing address of petitioner
CDR MAGUIRE, INC.
 Name
225 Chapman Street
 Number Street
Providence RI 02905
 City State ZIP Code

Mark W. Eckard, Esquire
 Printed name
Hamm Eckard, LLP
 Firm name, if any
5030 Anchor Way
 Number Street
Christiansted VI 00820
 City State ZIP Code

Name and mailing address of petitioner's representative, if any
Tina Vidal
 Name
8669 NW 36 Street, Suite 340
 Number Street
Miami FL 33166
 City State ZIP Code

Contact phone 340.773.6955 Email meckard@hammeckard.com
 Bar number 1051
 State VI

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 08/26/2016
 MM / DD / YYYY

x /s/ Mark W. Eckard
 Signature of attorney

x /s/ Tina Vidal
 Signature of petitioner or representative, including representative's title

Date signed 08/26/2016
 MM / DD / YYYY

Debtor Tibbar Energy USVI, LLC
Name

Case number (if known) _____

Name and mailing address of petitioner

Charles O. Schuster Revocable Trust u/d/t dated December 23, 1999

Name

P.O. Box 24154

Number Street

Christiansted VI 00824

City State ZIP Code

Name and mailing address of petitioner's representative, if any

David M. Schuster, Trustee

Name

P.O. Box 24154

Number Street

Christiansted VI 00824

City State ZIP Code

I declare under penalty of perjury that the foregoing is true and correct.

08/26/2016

Executed on

MM / DD / YYYY

x /s/ David M. Schuster, Trustee

Signature of petitioner or representative, including representative's title

Mark W. Eckard, Esquire

Printed name

Hamm Eckard, LLP

Firm name, if any

5030 Anchor Way

Number Street

Christiansted VI 00820

City State ZIP Code

Contact phone 340.773.6955 Email meckard@hammeckard.com

Bar number 1051

State 1051

x /s/ Mark W. Eckard

Signature of attorney

08/26/2016

Date signed

MM / DD / YYYY

Name and mailing address of petitioner

St. Croix Survey and Engineering, LLC

Name

5072 Flag Drive

Number Street

Christiansted VI 00820

City State ZIP Code

Name and mailing address of petitioner's representative, if any

Doug Fellenz

Name

5072 Flag Drive

Number Street

Christiansted VI 00820

City State ZIP Code

I declare under penalty of perjury that the foregoing is true and correct.

08/26/2016

Executed on

MM / DD / YYYY

x /s/ Doug Fellenz

Signature of petitioner or representative, including representative's title

Mark W. Eckard, Esquire

Printed name

Hamm Eckard, LLP

Firm name, if any

5030 Anchor Way

Number Street

Christiansted VI 00820

City State ZIP Code

Contact phone 340.773.6955 Email meckard@hammeckard.com

Bar number 1051

State VI

x /s/ Mark W. Eckard

Signature of attorney

08/26/2016

Date signed

MM / DD / YYYY