

Fill in this information to identify the case:

Debtor name: Fry Road, LLC

United States Bankruptcy Court for the: Northern District of California

Case number (if known): 24-50224

☒ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

- ☐ No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.
- ☒ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2.	List all contracts and unexpired leases	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
2.1.	Title of contract COMMERCIAL BUSINESS INSURANCE State what the contract or lease is for POLLUTION LIABILITY, POLICY NO. 0309-5789 Nature of debtor's interest INSURED State the term remaining 5/01/24 List the contract number of any government contract _____	ALLIED WORLD NATIONAL ASSURANCE COMPANY 199 WATER STREET NEW YORK NY 10038
2.2.	Title of contract COMMERCIAL BUSINESS INSURANCE State what the contract or lease is for EXCESS LIABILITY, POLICY NO. APX2101010-03 Nature of debtor's interest INSURED State the term remaining 3/31/24 List the contract number of any government contract _____	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease CAPITOL SPECIALTY INSURANCE CORPORATION 1600 ASPEN COMMONS SUITE 300 MIDDLETON WI 53562
2.3.	Title of contract RENEWAL ORDER FORM State what the contract or lease is for SOFTWARE SUBSCRIPTION Nature of debtor's interest _____ State the term remaining 11/08/24 List the contract number of any government contract _____	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease EGNYTE, INC. 1350 W. MIDDLEFIELD RD MOUNTAIN VIEW CA 94043

- 2.4. **Title of contract** COMMERCIAL BUSINESS INSURANCE
State what the contract or lease is for EXCESS LIABILITY, POLICY NO. ML4262627-2
Nature of debtor's interest INSURED
State the term remaining 3/31/24
List the contract number of any government contract _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
HOUSTON SPECIALTY INSURANCE CO
800 GESSNER RD STE 600
HOUSTON TX 77024
- 2.5. **Title of contract** RETAIL INSTALLMENT SALE CONTRACT
State what the contract or lease is for VEHICLE FINANCING
Nature of debtor's interest _____
State the term remaining 12/22/27
List the contract number of any government contract _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
JIM BURKE FORD
2001 OAK STREET
BAKERSFIELD CA 93301
- 2.6. **Title of contract** COMMERCIAL BUSINESS INSURANCE
State what the contract or lease is for CASUALTY/PROPERTY REPLACEMENT, POLICY NO. 7003T849905
Nature of debtor's interest INSURED
State the term remaining 5/13/24
List the contract number of any government contract _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
MARSH & MCLENNAN AGENCY LLC
360 HAMILTON AVENUE
SUITE 930
WHITE PLAINS NY 10601
- 2.7. **Title of contract** COMMERCIAL BUSINESS INSURANCE
State what the contract or lease is for LIABILITY, POLICY NO. 7003T849905
Nature of debtor's interest INSURED
State the term remaining 5/13/24
List the contract number of any government contract _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
MARSH & MCLENNAN AGENCY LLC
360 HAMILTON AVENUE
SUITE 930
WHITE PLAINS NY 10601
- 2.8. **Title of contract** COMMERCIAL BUSINESS INSURANCE
State what the contract or lease is for WORKER'S COMPENSATION, POLICY NO. FG5 2072607211
Nature of debtor's interest INSURED
State the term remaining _____
List the contract number of any government contract _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
MARSH & MCLENNAN AGENCY LLC
360 HAMILTON AVENUE
SUITE 930
WHITE PLAINS NY 10601

- | | | | |
|-------|--|--|---|
| 2.9. | Title of contract | COMMERCIAL BUSINESS INSURANCE | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

MARSH & MCLENNAN AGENCY LLC
360 HAMILTON AVENUE
SUITE 930
WHITE PLAINS NY 10601 |
| | State what the contract or lease is for | OTHER:, POLICY NO. BA3T850025 EX3T850222 & XC1EX00918231 | |
| | Nature of debtor's interest | INSURED | |
| | State the term remaining | 5/13/24 | |
| | List the contract number of any government contract | _____ | |
| | | | |
| 2.10. | Title of contract | COMMERCIAL BUSINESS INSURANCE | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

MARSH USA INC
PO BOX 846112
DALLAS TX 75284-6112 |
| | State what the contract or lease is for | COMMERCIAL CRIME, POLICY NO. 8242-7527 | |
| | Nature of debtor's interest | INSURED | |
| | State the term remaining | 3/31/24 | |
| | List the contract number of any government contract | _____ | |
| | | | |
| 2.11. | Title of contract | SUBSCRIPTION SERVICES AGREEMENT | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

ORACLE AMERICA, INC.
500 ORACLE PARKWAY
REDWOOD SHORES CA 94065 |
| | State what the contract or lease is for | SOFTWARE SUBSCRIPTION | |
| | Nature of debtor's interest | _____ | |
| | State the term remaining | UNDETERMINED | |
| | List the contract number of any government contract | _____ | |
| | | | |
| 2.12. | Title of contract | COMMERCIAL BUSINESS INSURANCE | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

R-T SPECIALTY, LLC
540 W. MADISON ST., 9TH FL
CHICAGO IL 60661 |
| | State what the contract or lease is for | GPL E&O, POLICY NO. ML4262627-2 | |
| | Nature of debtor's interest | INSURED | |
| | State the term remaining | 3/31/24 | |
| | List the contract number of any government contract | _____ | |
| | | | |
| 2.13. | Title of contract | COMMERCIAL BUSINESS INSURANCE | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

SCOTTSDALE INSURANCE CO
ONE NATIONWIDE PLZ
COLUMBUS OH 43215 |
| | State what the contract or lease is for | EMPLOYMENT PRACTICES, POLICY NO. EKS3473256 | |
| | Nature of debtor's interest | INSURED | |
| | State the term remaining | 3/31/24 | |
| | List the contract number of any government contract | _____ | |

Debtor **Fry Road, LLC**

Case number (if known) **24-50224**

2.14. **Title of contract** CUSTOM PROCESSING AND MARKETING AGREEMENT
State what the contract or lease is for ALMOND PROCESSING AND MARKETING
Nature of debtor's interest _____
State the term remaining 12/31/27
List the contract number of any government contract _____

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

THE ALMOND COMPANY
2900 AIRPORT DR.
MADERA CA 93637

Fill in this information to identify the case:

Debtor name: Fry Road, LLC

United States Bankruptcy Court for the: Northern District of California

Case number (if known): 24-50224

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud 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.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☐ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☐ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☐ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☐ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☐ *Schedule H: Codebtors* (Official Form 206H)
- ☐ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☒ *Amended Schedule G*
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

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

Executed on 5/13/2024
MM/DD/YYYY

x

/s/ Kirk Hoiberg

Signature of individual signing on behalf of debtor

Kirk Hoiberg
Printed name

Authorized Signatory
Position or relationship to debtor