

**NOT-FOR-PROFIT CORPORATION  
 UNIFORM BUSINESS REPORT (UBR)**

**DOCUMENT # 742153**

1. Entity Name

Govenant:Village:of:Florida:,Inc

**DO NOT WRITE IN THIS SPACE**

43534

2. Principal Place of Business  
 9201 West Broward Blvd.  
 Suite, Apt. #, etc.

3. Mailing Address  
 5115 North Francisco Avenue  
 Suite 200  
 Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
 Plantation, Florida

City & State  
 Chicago, Illinois

4. FEI Number 5211158705

Applied For  
 Not Applicable

Zip  
 33394

Country  
 USA

Zip  
 60625

Country  
 USA

5. Certificate of Status Desired  \$8.75 Additional Fee Required

**DO NOT WRITE IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name  
 Corporation Services Company

Street Address (P.O. Box Number is Not Acceptable)

1201 Hayes Street, Suite 105

City  
 Tallahassee

FL

Zip Code  
 32301

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE

*Carole Harlan*

Carole Harlan, Authorized Agent 9/30/02

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when retreating)

DATE

9. Election Campaign Financing  
 Trust Fund Contribution

\$5.00 May Be  
 Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	David A. Dwight - P 5115 North Francisco Avenue, Suite 200 Chicago, Illinois 60625
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Rick K. Fisk - VP 5115 North Francisco Avenue, Suite 200 Chicago, Illinois 60625
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Richard W. Olson - T 5115 North Francisco Avenue, Suite 200 Chicago, Illinois 60625
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Mark C. Eastburg - D 6985 Oak Brook SE Grand Rapids, Michigan 49576
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Ralph L. Sager - D 240 Talcott Notch Road Farmington, CT 06032
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Douglas G. Mortenson - D 2646 Cascade Springs Drive Grand Rapids, Michigan 49546

**DO NOT WRITE IN THIS SPACE**

CR2E0378 (12/01)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

*David A. Dwight* David A. Dwight

09-29-02 713-818-2294

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Phone #