2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#742153

FILED Apr 29, 2009 Secretary of State

Entity Name: COVENANT VILLAGE OF FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business: 9201 W. BROWARD BLVD. PLANTATION, FL 33324 **Current Mailing Address: New Mailing Address:** 5700 OLD ORCHARD ROAD 5115 N FRANCISCO AVE CHICAGO, IL 60625 SKOKIE, IL 60077 FEI Number: 52-1115870 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPORATION SERVICES COMPANY 1201 HAYS STREET SUITE 105 TALLAHASSEE, FL 32301 US 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition ANDERSON, CURTIS B Name: Name: 249 HATLEN AVENUE Address: Address: City-St-Zip: MOUNT PROSPECT, IL 60056 City-St-Zip: Title: () Delete Title: () Change () Addition EASTBURG, MARK C Name: Name: Address: 6985 OAK BROOK SE Address: City-St-Zip: GRAND RAPIDS, MI 49576 City-St-Zip: Title: () Delete Title: () Change () Addition ESPINOSA, MARC E Name: Name: 5420 WARD ROAD Address: Address: City-St-Zip: ARVADA, CO 80002 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: FISK, RICK K Name: FISK, RICK K 5115 NORTH FRANCISCO AVENUE Address: Address: 5700 OLD ORCHARD RD City-St-Zip: CHICAGO, IL 60625 City-St-Zip: SKOKIE, IL 60077 Title: () Delete Title: CEOT (X) Change () Addition BUIKEMA, ELIZABETH B Name: Name: BUIKEMA, ELIZABETH B 5115 N FRANCISCO AVE 5700 OLD ORCHARD RD Address: Address: City-St-Zip: CHICAGO, IL 60625 City-St-Zip: SKOKIE, IL 60077 Title: () Delete Title: (X) Change () Addition WEISBROCK, ANN P HARRIFF, JACK R Name: Name: Address: 248 MEADOWBROOK LANE Address: 5700 OLD ORCHARD RD HINSDALE, IL 60521 SKOKIE, IL 60077 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JACK R. HARRIFF S 04/29/2009