2018 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 742153

Entity Name: COVENANT VILLAGE OF FLORIDA, INC.

FILED Aug 02, 2018 **Secretary of State** CC8687292492

Current Principal Place of Business:

5700 OLD ORCHARD RD. SKOKIE. IL 60077

Current Mailing Address:

5700 OLD ORCHARD RD. SKOKIE, IL 60077 US

FEI Number: 52-1115870 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET 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

Officer/Director Detail:

Title PRESIDENT, ASST. SECRETARY, EX-Title EX-OFFICIO, PRESIDENT OF

COVENANT MINISTRIES OF OFFICIO

BENEVOLENCE CUNLIFFE, TERRI S Name

Name OXENDALE, RODGER A. 5700 OLD ORCHARD RD Address

Address 5145 N. CALIFORNIA AVE. City-State-Zip: SKOKIE IL 60077

City-State-Zip: CHICAGO IL 60625

Title DIRECTOR

Title EX-OFFICIO, PRESIDENT OF THE HODGKINSON, DONALD Name **EVANGELICAL COVENANT CHURCH**

Name

5700 OLD ORCHARD ROAD Address Name WENRICH, JOHN

City-State-Zip: SKOKIE IL 60077 Address 8303 W HIGGINS ROAD

City-State-Zip: CHICAGO IL 60631

CFO, TREASURER, ASST. Title

SECRETARY, ADVISOR, SENIOR VICE

Title **PRESIDENT**

AAGAARD, M.D., JON P. Name HOLT, JODY A. Address 5700 OLD ORCHARD ROAD Address 5700 OLD ORCHARD ROAD

SKOKIE IL 60077 City-State-Zip: City-State-Zip: SKOKIE IL 60077

Title DIRECTOR, CHAIR Title DIRECTOR Name EASTBURG, MARK Name DAVIS, M.D., KARA E.

5700 OLD ORCHARD ROAD Address Address 5700 OLD ORCHARD ROAD

City-State-Zip: SKOKIE IL 60077 City-State-Zip: SKOKIE IL 60077

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DIRECTOR

I hereby 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 all other like empowered.

08/02/2018 SIGNATURE: JODY HOLT SECRETARY

Electronic Signature of Signing Officer/Director Detail

Date

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name STANTE, MARLENE E.

Address 5700 OLD ORCHARD ROAD

.....

City-State-Zip: SKOKIE IL 60077

Title DIRECTOR, SECRETARY

Name BENTLY, SARAH

Address 5700 OLD ORCHARD RD.

City-State-Zip: SKOKIE IL 60077

Title DIRECTOR

Name RINARD, DALE GLEN

Address 5700 OLD ORCHARD ROAD

City-State-Zip: SKOKIE IL 60077

Title SENIOR VICE PRESIDENT AND GENERAL

COUNSEL, ASST. SECRETARY, ADVISOR

Name ERICKSON, DAVID G

Address 5700 OLD ORCHARD ROAD

City-State-Zip: SKOKIE IL 60077

Title ADVISOR, EXECUTIVE VICE PRESIDENT/CFO OF

COVENANT MINISTRIES OF BENEVOLENCE

Name ANDERSON, LAWRENCE P

Address 5145 NORTH CALIFORNIA AVE

City-State-Zip: CHICAGO IL 60625

Title DIRECTOR

Name MARTIN, ROBERT

Address 5700 OLD ORCHARD ROAD

City-State-Zip: SKOKIE IL 60077

Title DIRECTOR

Name KINCANON, KURT

Address 5700 OLD ORCHARD ROAD

City-State-Zip: SKOKIE IL 60077

Title DIRECTOR

Name CHRISTENSEN, PAMELA
Address 5700 OLD ORCHARD ROAD

City-State-Zip: SKOKIE IL 60077

 Title
 DIRECTOR, VICE CHAIR

 Name
 MANLOVE, MATTHEW

 Address
 5700 OLD ORCHARD ROAD

City-State-Zip: SKOKIE IL 60077

Title DIRECTOR

Name VANOVER, ANDREW
Address 5700 OLD ORCHARD RD.

City-State-Zip: SKOKIE IL 60077

Title ASST. SECRETARY

Name ERICKSON, REBEKAH

Address 5700 OLD ORCHARD ROAD

City-State-Zip: SKOKIE IL 60077

Title EX-OFFICIO, COVENANT MINISTRIES

OF BENEVOLENCE

Name NELSON, RICHARD P

Address 5145 NORTH CALIFORNIA AVE

City-State-Zip: CHICAGO IL 60625

Title DIRECTOR

Name PALMER, MARY

Address 5700 OLD ORCHARD ROAD

City-State-Zip: SKOKIE IL 60077