2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742153

Entity Name: COVENANT LIVING OF FLORIDA, INC.

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:

City-State-Zip:

Address

Electronic Signature of Registered Agent

Date

FILED Apr 29, 2021

Secretary of State

3088444481CC

Officer/Director Detail :

SKOKIE IL 60077

Title PRESIDENT, CEO, ASST. SECRETARY Title DIRECTOR

CUNLIFFE, TERRI S Name Name EASTBURG, MARK C. Address 5700 OLD ORCHARD RD.

5700 OLD ORCHARD RD Address SUITE 100 SUITE 100

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

City-State-Zip:

Title DIRECTOR, SECRETARY Title DIRECTOR, CHAIR Name BENTLEY, SARAH Name MANLOVE, MATTHEW

Address 5700 OLD ORCHARD RD. Address 5700 OLD ORCHARD RD.

SUITE 100 SUITE 100

Title SENIOR VP, GENERAL COUNSEL, DIRECTOR Title

ASSISTANT SECRETARY Name VANOVER, ANDREW

Name ERICKSON, DAVID G. Address

5700 OLD ORCHARD RD. Address 5700 OLD ORCHARD RD. SUITE 100

SUITE 100 City-State-Zip: SKOKIE IL 60077

City-State-Zip: SKOKIE IL 60077

Title **DIRECTOR**

SENIOR VICE PRESIDENT/ASSISTANT Title Name PALMER, MARY SECRETARY

5700 OLD ORCHARD RD. Name LACROIX, AMY

5700 OLD ORCHARD RD. City-State-Zip: SKOKIE IL 60077 Address

City-State-Zip: SKOKIE IL 60077

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City-State-Zip:

SKOKIE IL 60077

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.

SIGNATURE: DAVID ERICKSON 04/29/2021 SR. VICE PRESIDENT

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title SENIOR VICE PRESIDENT/ASSISTANT

SECRETARY

Name RABE, BILL

Address 5700 OLD ORCHARD RD.

City-State-Zip: SKOKIE IL 60077

Title DIRECTOR
Name REPPE, DIXIE

Address 5700 OLD ORCHARD RD.

City-State-Zip: SKOKIE IL 60077

Title SENIOR VICE

PRESIDENT/CFO/TREASURER/ASSISTANT

SECRETARY

Name JUSTIE, JEAN

Address 5700 OLD ORCHARD RD.

City-State-Zip: SKOKIE IL 60077

Title DIRECTOR

Name BUETTNER, KATHY

Address 5700 OLD ORCHARD RD.

City-State-Zip: SKOKIE IL 60077

Title DIRECTOR

Name PETERSON, LOANN

Address 5700 OLD ORCHARD RD.

City-State-Zip: SKOKIE IL 60077

Title ASST. SECRETARY
Name ERICKSON, REBEKAH

Address 5700 OLD ORCHARD RD.

City-State-Zip: SKOKIE IL 60077

Title EX-OFFICIO

Name WENRICH, JOHN

Address 5700 OLD ORCHARD RD.

City-State-Zip: SKOKIE IL 60077

Title DIRECTOR
Name KIM, DAVID

Address 5700 OLD ORCHARD RD.

City-State-Zip: SKOKIE IL 60077

Title DIRECTOR/VICE-CHAIR

Name CREANEY, JANET

Address 5700 OLD ORCHARD RD.

City-State-Zip: SKOKIE IL 60077

Title DIRECTOR

Name FREDRICKSON, JOHN

Address 5700 OLD ORCHARD RD.

City-State-Zip: SKOKIE IL 60077

Title DIRECTOR

Name KINCANON, KURT

Address 5700 OLD ORCHARD RD.

City-State-Zip: SKOKIE IL 60077

Title DIRECTOR

Name FLEWELLEN, LORENE
Address 5700 OLD ORCHARD RD.

City-State-Zip: SKOKIE IL 60077

Title DIRECTOR

Name MARTIN, ROBERT

Address 5700 OLD ORCHARD RD.

City-State-Zip: SKOKIE IL 60077

Title EX-OFFICIO

Name POSTON, SUSAN

Address 5700 OLD ORCHARD RD.

City-State-Zip: SKOKIE IL 60077