

Fill in this information to identify the case:

United States Bankruptcy Court for the:

Eastern District of Missouri
(State)

Case number (if known): 24- Chapter 11

☐ Check if this is an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

06/22

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name Safe Haven Hospice of Southern Illinois, LLC

2. All other names debtor used in the last 8 years

Include any assumed names, trade names, and *doing business* as names

3. Debtor's federal Employer Identification Number (EIN) 3 2 - 0 4 8 7 2 0 9

4. Debtor's address

Principal place of business		Mailing address, if different from principal place of business
2 City Place Drive Number Street		Number Street
2nd Floor		P.O. Box
St. Louis, City	MO 63141-7055 State ZIP Code	City State ZIP Code
St. Louis City County		Location of principal assets, if different from principal place of business
		Number Street
		City State ZIP Code

5. Debtor's website (URL) <https://christianhorizonsliving.org>

Debtor Safe Haven Hospice of Southern Illinois, LLC
Name

Case number (if known) 24-

6. Type of debtor

- ☐ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))
☐ Partnership (excluding LLP)
☐ Other. Specify: _____

7. Describe debtor's business

A. Check one:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
☐ Railroad (as defined in 11 U.S.C. § 101(44))
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
☐ None of the above

B. Check all that apply:

- ☐ Tax-exempt entity (as described in 26 U.S.C. § 501)
☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3)
☐ Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

6 2 3 3

8. Under which chapter of the Bankruptcy Code is the debtor filing?

A debtor who is a "small business debtor" must check the first sub-box. A debtor as defined in § 1182(1) who elects to proceed under subchapter V of chapter 11 (whether or not the debtor is a "small business debtor") must check the second sub-box.

Check one:

- ☐ Chapter 7
☐ Chapter 9
☐ Chapter 11. *Check all that apply:*

- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$3,024,725. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ The debtor is a debtor as defined in 11 U.S.C. § 1182(1), its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$7,500,000, **and it chooses to proceed under Subchapter V of Chapter 11.** If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return, or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

- ☐ Chapter 12

Debtor Safe Haven Hospice of Southern Illinois, LLC
Name

Case number (if known) 24-

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

☐ No

☐ Yes. District _____ When _____ Case number _____
MM / DD / YYYY

If more than 2 cases, attach a separate list.

District _____ When _____ Case number _____
MM / DD / YYYY

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?

☐ No

☐ Yes. Debtor See Schedule 1 Relationship Affiliate

District Easter District of Missouri When _____

List all cases. If more than 1, attach a separate list.

MM / DD / YYYY

Case number, if known _____

11. Why is the case filed in this district?

Check all that apply:

☐ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.

☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

☐ No

☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (Check all that apply.)

☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard? _____

☐ It needs to be physically secured or protected from the weather.

☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

☐ Other _____

Where is the property?

Number _____ Street _____

City _____ State ZIP Code _____

Is the property insured?

☐ No

☐ Yes. Insurance agency _____

Contact name _____

Phone _____

Statistical and administrative information

Debtor Safe Haven Hospice of Southern Illinois, LLC
Name

Case number (if known) 24-

13. Debtor's estimation of available funds

Check one:

- ☐ Funds will be available for distribution to unsecured creditors.
☐ After any administrative expenses are paid, no funds will be available for distribution to unsecured creditors.

14. Estimated number of creditors

- | | | |
|----------------------------------|--|--|
| <input type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000 | <input type="checkbox"/> 25,001-50,000 |
| <input type="checkbox"/> 50-99 | <input type="checkbox"/> 5,001-10,000 | <input type="checkbox"/> 50,001-100,000 |
| <input type="checkbox"/> 100-199 | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999 | | |

15. Estimated assets

- | | | |
|--|--|--|
| <input type="checkbox"/> \$0-\$50,000 | <input type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion |
| <input type="checkbox"/> \$50,001-\$100,000 | <input type="checkbox"/> \$10,000,001-\$50 million | <input type="checkbox"/> \$1,000,000,001-\$10 billion |
| <input type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion |

16. Estimated liabilities

- | | | |
|--|--|--|
| <input type="checkbox"/> \$0-\$50,000 | <input type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion |
| <input type="checkbox"/> \$50,001-\$100,000 | <input type="checkbox"/> \$10,000,001-\$50 million | <input type="checkbox"/> \$1,000,000,001-\$10 billion |
| <input type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion |

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement 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.

17. Declaration and signature of authorized representative of debtor

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

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

Executed on 07/16/2024
MM / DD / YYYY

x Kathleen Bertram

Signature of authorized representative of debtor

Kate Bertram

Printed name

Title Chief Operating Officer

Debtor Safe Haven Hospice of Southern Illinois, LLC
Name

Case number (if known) 24-

18. Signature of attorney

x /s/ David A. Sosne
Signature of attorney for debtor

Date 07/16/2024
MM / DD / YYYY

David A. Sosne

Printed name

Summers Compton Wells LLC

Firm name

903 South Lindbergh Blvd., Suite 200

Number Street

St. Louis,

City

MO 63131

State ZIP Code

(314) 991 - 4999

Contact phone

dsosne@scw.law

Email address

28365

Bar number

MO

State

Schedule 1

Pending Bankruptcy Cases Filed by the Debtor and Affiliates of the Debtor

On the date hereof, each of the affiliated entities listed below (including the debtor in this chapter 11 case, collectively, the “**Debtors**”) filed a voluntary petition for relief under chapter 11 of title 11 of the United States Code in the United States Bankruptcy Court for the Eastern District of Missouri. The Debtors have filed a motion requesting that the chapter 11 cases of these entities be consolidated for procedural purposes only and jointly administered pursuant to Rule 1015(b) of the Federal Rules of Bankruptcy Procedure.

	DEBTOR NAME	EIN NUMBER
1.	Midwest Christian Villages, Inc., d/b/a Christian Horizons	26-0275009
2.	Hickory Point Christian Village, Inc., d/b/a Hickory Point Christian Village – f/k/a Fair Havens Hickory Point Christian Village	37-0987659
3.	Lewis Memorial Christian Village	51-0173104
4.	Senior Care Pharmacy Services, LLC	30-0971176
5.	New Horizons PACE MO, LLC	88-2494745
6.	Risen Son Christian Village	42-1279738
7.	Spring River Christian Village, Inc.	43-1341462
8.	Christian Homes, Inc., d/b/a The Christian Village, d/b/a Washington Christian Village and d/b/a Wabash Christian Village	37-0841562
9.	Crown Point Christian Village, Inc., f/k/a Chicago Land Christian Village, Inc.	31-1114614
10.	Hoosier Christian Village, Inc., d/b/a Hoosier Christian Village	23-7423749
11.	Johnson Christian Village Care Center, LLC d/b/a Johnson Christian Village	47-1908262
12.	River Birch Christian Village, LLC d/b/a River Birch Living, d/b/a The Ambrose at Panther Creek	84-3647232
13.	Washington Village Estates, LLC	20-5109088
14.	Christian Horizons Living, LLC f/k/a Christian Horizons LLC	84-3634871

15.	Wabash Christian Therapy and Medical Clinic, LLC d/b/a Wabash Christian Therapy	38-3922894
16.	Wabash Christian Village Apartments, LLC	88-2668352
17.	Wabash Estates, LLC	20-5108743
18.	Safe Haven Hospice of Southern Illinois, LLC	32-0487209
19.	Heartland Christian Village, LLC	20-5130196
20.	Midwest Senior Ministries, Inc.	20-1053401
21.	Shawnee Christian Nursing Center, LLC d/b/a Shawnee Christian Village	20-5130068

**RESOLUTIONS OF THE BOARD
OF SAFE HAVEN HOSPICE OF SOUTHERN ILLINOIS, LLC**
July 11, 2024

At a meeting of the board of Safe Haven Hospice of Southern Illinois, LLC (the “Company”) held July 11, 2024 in which a quorum of the board members were in attendance, the following resolutions were adopted:

RESOLVED, that in the judgment of the Board, it may be desirable and in the best interests of the Company, its creditors, the charitable mission and other interested parties, to take certain actions to protect the assets of the Company from creditors, including, without limitation, to cause a voluntary petition to be filed by the Company seeking relief under the provisions of chapter 11, title 11, of the United States Code (the “Bankruptcy Code”) and to take any related actions necessary to file for and effectuate bankruptcy protection in the United States Bankruptcy Court for the Eastern District of Missouri (the “Bankruptcy Court”) and to take other actions in and during the bankruptcy case; and it is

FURTHER RESOLVED, that Kate Bertram (President and CEO), Barb Shepard (Chief Human Resources & Compliance Officer) and/or Kenna Hudson (Controller) (each an “Authorized Officer” and together the “Authorized Officers”) are, and each of them hereby is, authorized, on behalf of and in the name of the Company, to take all actions deemed necessary or appropriate to protect the assets of the Company and seek protection from creditors, including without limitation, if they deem it appropriate, to execute and verify or certify a voluntary petition under chapter 11 of the Bankruptcy Code and to sign or authorize any and all other pleadings, instruments, documents or actions appropriate and desirable, as determined by them in the exercise of their discretion, prior to and throughout the course of the bankruptcy case; and it is

FURTHER RESOLVED, that each of the Authorized Officers of the Company be, and each of them hereby is, authorized to continue the retention of the Company’s existing professionals (including, without limitation, the law firms of Dentons US LLP and Summers Compton Wells, the investment banking firm of B.C. Ziegler and Company, Plante Moran as auditor and tax consultant and Kurtzman Carson Consultants, LLC dba Verita Global as claims and noticing agent) and to approve the engagement of such other counsel or other professionals as determined by the Authorized Officers to render services to and to represent the Company in connection with any proceeding under the Bankruptcy Code, and any other related matter in connection therewith as any of the Authorized Officers of the Company, and such other officers as they shall from time to time designate, shall approve and to continue to pay retainers to such firms as set forth in their respective engagement letters; and it is

FURTHER RESOLVED, that the appointment of Healthcare Management Partners, LLC as Chief Restructuring Officer effective July 16, 2024 on substantially the terms set forth in the engagement letter presented to the Board is hereby approved; and it is

FURTHER RESOLVED, that each of the Authorized Officers of the Company be, and each of them hereby is, authorized to obtain Chapter 11 Debtor in Possession financing and use of cash collateral on terms substantially similar to those set forth in the Term Sheet presented to the Board and to approve and enter into related implementing documentation and pleadings; and it is

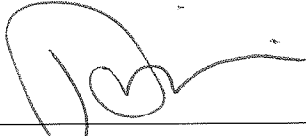
FURTHER RESOLVED, that each of the Authorized Officers of the Company be, and hereby is, authorized to take any and all further action, to execute and deliver any and all further agreements, instruments and documents, and to cause the Company to pay all expenses, that they may deem necessary or appropriate in order to carry out fully the intent and accomplish the transactions contemplated by the foregoing resolutions; and that any such actions previously taken by such officer or officers are hereby ratified, confirmed and approved.

CERTIFICATE OF RESOLUTION

The undersigned hereby certifies that the undersigned is the Secretary of Safe Haven Hospice of Southern Illinois, LLC (the "Company"), and that annexed hereto is a true and correct copy of resolutions duly adopted by the Board of the Company at a meeting held on July 11, 2024 and that such resolutions have not been rescinded and remain in full force and effect on the date hereof.

IN WITNESS WHEREOF, the undersigned has hereunto set undersigned's hand and affixed the seal of the Company as of July 16, 2024.

V. Scott Williams


Secretary

Fill in this information to identify the case:

Debtor name Midwest Christian Villages, Inc.
United States Bankruptcy Court for the: _____ District of Missouri
(State)
Case number (If known): 24-_____

☐ Check if this is an amended filing

Official Form 204

Chapter 11 or Chapter 9 Cases: List of Consolidated Creditors Who Have the 30 Largest Unsecured Claims and Are Not Insiders

12/15

A list of creditors holding the 50 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an *insider*, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 50 largest unsecured claims.

	Name of creditor and complete mailing address, including zip code	Name, telephone number, and email address of creditor contact	Nature of the claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of unsecured claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
					Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
1.	Derek Hopp as Executor of the Estate of c/o Kelly & Castagna LLC 121 N Main St. Fl 3 Bloomington, IL 61701	Laura Castagna Email: laura@injurylawbloomington.com	Litigation				\$1,666,839.89
2.	Select Rehabilitation, LLC PO Box 71985 Chicago, IL 60694	Timothy Makowski Email: tim.makowski@selectrehab.com	Trade Payables				\$1,227,534.74
3.	Aegis Therapies Inc 4933 Old Greenwood Road Fort Smith, AR 72903	Barbara Duvall Email: Barbara.Duvall@aegistherapies.com	Trade Payables				\$1,012,589.61
4.	AmerisourceBergen 905 N Main Street Austin, MN 55912	David Albrecht Email: david.albrecht@astrupcompanies.com	Trade Payables				\$444,051.37
5.	AETNA PO Box 804735 Chicago, IL 60680	Robert Chibbaro Email: ChibbaroR1@aetna.com	Trade Payables				\$438,133.10
6.	Shores Builders Inc. 2222 East McCord Street Centralia, IL 62801	Gregory S. McCoy Email: gmc coy@shoresbuilders.com	Trade Payables				\$396,086.61
7.	Macon County Collector 141 S Main St, Room 302 Decatur, IL 62523	John D. Jackson	Taxes				\$381,474.06
8.	Michael Colliver & Jacqueline Boring, FO c/o Levin & Perconti 325 North LaSalle, Suite 300 Chicago, IL 60654	Jaime Koziol Delaney Email: jak@levinperconti.com	Litigation				\$350,000.00

Debtor: Midwest Christian Villages, Inc.
NameCase number (if known) 24-

9.	Gordon Food Service, Inc. 342 Gordon Industrial Way Shepherdsville, KY 40165	Chris Pitcher Email: jak@levinperconti.com	Trade Payables				\$342,057.70
10.	Synergi Partners Inc PO Box 5599 Florence, SC 29502	Aaron Platt Email: aplatt@synergipartners.com	Trade Payables				\$300,704.28
11.	Holladay Construction Group LLC 3454 Douglas Road Ste 250 South Bend, IN 46635	Shannon Hyduk Email: shyduk@hcqllc.net	Trade Payables				\$268,576.66
12.	Sangamon County Tax Collector 200 S 9 th Street Springfield, IL 62701	Joe Aiello	Tax				\$221,787.36
13.	Sentinel Technologies, Inc. PO Box 85080 Chicago, IL 60680	Michelle Knapczyk Email: mknapczyk@sentinel.com	Trade Payables				\$188,741.48
14.	Medline Industries, Inc. Lockbox 14400 5505 N Cumberland Ave Ste 307 Chicago, IL 60656	John Cervino Email: jcervino@medline.com	Trade Payables				\$185,858.25
15.	Resident #1 - Hickory Point Christian Village [REDACTED]	[REDACTED]	Resident Deposit				\$175,579.20
16.	Resident #2 - Hickory Point Christian Village [REDACTED]	[REDACTED]	Resident Deposit				\$175,572.00
17.	Resident #3 - Hickory Point Christian Village [REDACTED]	[REDACTED]	Resident Deposit				\$175,572.00
18.	Resident #4 - Hickory Point Christian Village [REDACTED]	[REDACTED]	Resident Deposit				\$170,465.40
19.	Resident #5 - Hickory Point Christian Village [REDACTED]	[REDACTED]	Resident Deposit				\$170,458.20
20.	Resident #6 - Lewis Memorial Christian Village [REDACTED]	[REDACTED]	Resident Deposit				\$167,300.10
21.	Resident #7 - Lewis Memorial Christian Village [REDACTED]	[REDACTED]	Resident Deposit				\$162,427.50
22.	Resident #8 - Lewis Memorial Christian Village [REDACTED]	[REDACTED]	Resident Deposit				\$160,224.30
23.	Resident #9 - Hickory Point Christian Village [REDACTED]	[REDACTED]	Resident Deposit				\$154,782.00

Debtor: Midwest Christian Villages, Inc.
Name

Case number (if known) 24-

24.	Resident #10 - Hickory Point Christian Village [REDACTED]	[REDACTED]	Resident Deposit				\$138,330.00
25.	Resident #11 - Risen Son Christian Village [REDACTED]	[REDACTED]	Resident Deposit				\$136,019.70
26.	Resident #12 - Hickory Point Christian Village [REDACTED]	[REDACTED]	Resident Deposit				\$135,249.30
27.	Resident #13 - Hickory Point Christian Village [REDACTED]	[REDACTED]	Resident Deposit				\$135,249.30
28.	Resident #14 - Risen Son Christian Village [REDACTED]	[REDACTED]	Resident Deposit				\$132,016.50
29.	Resident #15 - Lewis Memorial Christian Village [Redacted]	[REDACTED]	Resident Deposit				\$128,520.00
30.	Resident #16 -Crown Point Christian Village [REDACTED}	[REDACTED]	Resident Deposit				\$120,678.50

Fill in this information to identify the case and this filing:

Debtor Name Safe Haven Hospice of Southern Illinois, LLC
United States Bankruptcy Court for the: Eastern District of Missouri
(State)
Case number (if known): _____

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 _____
- ☐ Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 30 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 07/16/2024
MM / DD / YYYY

x Kathleen Bertram
Signature of individual signing on behalf of debtor

Kate Bertram
Printed name

Chief Operating Officer
Position or relationship to debtor