

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14771

Entity Name: THE ALTERNATIVE PROGRAMS, INC.**Current Principal Place of Business:**3300 NW 27TH AVENUE
MIAMI, FL 33142**Current Mailing Address:**P O BOX 472904
MIAMI, FL 33247-2904 US**FEI Number:** 59-2690657**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**KILPATRICK, KENNETH M
3300 NW 27TH AVENUE
PORTABLES - SW
MIAMI, FL 33142 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:** KENNETH M. KILPATRICK

03/08/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title EXECUTIVE DIRECTOR
Name KILPATRICK, KENNETH M
Address P O BOX 472904
City-State-Zip: MIAMI FL 33247-2904

Title VICE CHAIRPERSON, DIRECTOR
Name HINES, BEATRICE
Address P O BOX 472904
City-State-Zip: MIAMI FL 33247-2904

Title TREASURER, DIRECTOR
Name BURSE, DWONE T
Address P O BOX 472904
City-State-Zip: MIAMI FL 33247-2904

Title DIRECTOR
Name ROBINSON-DUFFIE, CECILY ESQ.
Address P O BOX 472904
City-State-Zip: MIAMI FL 33247-2904

Title CHAIRPERSON, DIRECTOR
Name PURDUE, MYRTLE E
Address P.O. BOX 472904
City-State-Zip: MIAMI FL 33247-2904

Title SECRETARY, DIRECTOR
Name JONES, GEORGE E.
Address P.O. BOX 472904
City-State-Zip: MIAMI FL 33247-2904

Title DIRECTOR
Name REGALADO, MARCOS
Address P.O. BOX 472904
City-State-Zip: MIAMI FL 33247-2904

Title DIRECTOR
Name ELLIS, REV. GEORGE
Address P.O. BOX 472904
City-State-Zip: MIAMI FL 33247-2904

Continues on page 2

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: KENNETH M KILPATRICK

EXECUIVE DIRECTOR

03/08/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	FORD, ERVENS
Address	P O BOX 472904
City-State-Zip:	MIAMI FL 33247-2904