

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000069031

**Entity Name:** ALTERNATIVE BEHAVIORAL CONCEPTS, INC.

**Current Principal Place of Business:**

202 HOWARD STREET  
SUITE 3  
AUBURNDALE, FL 33823

**Current Mailing Address:**

PO BOX 1057  
LAKE ALFRED, FL 33850

**FEI Number: 59-3463137**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

JORDAN, KEITH A  
720 S. GLENCRUITEN AVE.  
LAKE ALFRED, FL 33850 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

**Officer/Director Detail :**

Title	P	Title	VP
Name	BORDEN-JORDAN, CHERYL A	Name	JORDAN, KEITH A
Address	720 S GLENCRUITEN AVE, PO BOX 1071	Address	720 S GLENCRUITEN AVE, P O BOX 1071
City-State-Zip:	LAKE ALFRED FL 33850	City-State-Zip:	LAKE ALFRED FL 33850

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: KEITH JORDAN**

**VP**

**03/26/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date