

**2024 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N18000008765

**Entity Name:** SOLUTION ASSOCIATION FOR ENRICHMENT, INC.

**Current Principal Place of Business:**

1738 HIDDEN FOREST LN  
JACKSONVILLE, FL 32225

**Current Mailing Address:**

1738 HIDDEN FOREST LN  
JACKSONVILLE, FL 32225 US

**FEI Number:** 83-1656101

**Certificate of Status Desired:** No

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

GREY, MURIELLE  
1738 HIDDEN FOREST LN  
JACKSONVILLE, FL 32225 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            PRESIDENT  
Name            GREY, MURIELLE  
Address        1738 HIDDEN FOREST LN  
City-State-Zip: JACKSONVILLE FL 32225

Title            TREASURER  
Name            JOCELYN, JACQUELINE  
Address        2955 CASSIA LANE  
City-State-Zip: JACKSONVILLE FL 32246

Title            VP  
Name            GREY, JASMINE MONET  
Address        1738 HIDDEN FOREST LN  
City-State-Zip: JACKSONVILLE FL 32225

*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: MURIELLE GREY

PRESIDENT

06/23/2024

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

\_\_\_\_\_ Date