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.

DIRECTOR

SIGNATURE: GREY, MURIELLE

Electronic Signature of Signing Officer/Director Detail

Current Mailing Address: 1738 HIDDEN FOREST LN JACKSONVILLE, FL 32225 US

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: SOLUTION ASSOCIATION FOR ENRICHMENT, INC.

FEI Number: 83-1656101

DOCUMENT# N1800008765

1738 HIDDEN FOREST LN JACKSONVILLE. FL 32225

Current Principal Place of Business:

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

Officer/Director Detail :

Title	P/D	Title	T/D
Name	GREY, MURIELLE	Name	JOCELYN, JACQUELINE
Address	1738 HIDDEN FOREST LN	Address	2955 CASSIA LANE
City-State-Zip:	JACKSONVILLE FL 32225	City-State-Zip:	JACKSONVILLE FL 32246

ato Eip.		

Certificate of Status Desired: No

FILED Mar 30, 2023 Secretary of State 4222431884CC

Date

Date

03/30/2023