

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P16000064104

Entity Name: SANKOFA HEALING AND ENRICHMENT, INC.

Current Principal Place of Business:

3990 WHISPERING PINES CIR
GREENWOOD, FL 32443-2274

Current Mailing Address:

3990 WHISPERING PINES CIR
GREENWOOD, FL 32443-2274 US

FEI Number: 51-0572458

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GAMBLE, MICHELLE
3990 WHISPERING PINES CIR
GREENWOOD, FL 32443-2274 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 CEO
Name GAMBLE, MICHELLE
Address 3990 WHISPERING PINES CIR
City-State-Zip: GREENWOOD FL 32443-2274

Title CFO
Name JILES, ANTHONY
Address 793 STONEHOUSE RD
City-State-Zip: TALLAHASSEE FL 32301

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: MICHELLE GAMBLE

DIRECTOR/CEO

04/17/2024

Electronic Signature of Signing Officer/Director Detail

Date