

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

DOCUMENT# N28117

**Entity Name:** SUNNIER PALMS MEMBERS' LODGE, INC.**Current Principal Place of Business:**8800 OKEECHOBEE RD.  
FT. PIERCE, FL 34945**Current Mailing Address:**8800 OKEECHOBEE RD.  
FT. PIERCE, FL 34945 US**FEI Number:** 65-0085597**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BOARMAN, DANIEL LEE  
8800 OKEECHOBEE RD #24  
FT PIERCE, FL 34945 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:** DANIEL L BOARMAN

01/30/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            MARTIN-MORGANELLI, JULENE  
Address        8800 OKEECHOBEE RD, LOT # 22  
City-State-Zip: FORT PIERCE FL 34945

Title            VP, SECRETARY  
Name            HYLAND, CATHERINE S  
Address        8800 OKEECHOBEE RD, LOT # 20  
City-State-Zip: FORT PIERCE FL 34945

Title            DIR  
Name            ALLISON, FRANK  
Address        8800 OKEECHOBEE RD LOT #29  
City-State-Zip: FORT PIERCE FL 34945

Title            TREASURER  
Name            BOARMAN, DANIEL LEE  
Address        8800 OKEECHOBEE RD  
                 LOT 24  
City-State-Zip: FORT PIERCE FL 34945

Title            DIR  
Name            OBER, WAYNE  
Address        8800 OKEECHOBEE ROAD LOT # 44  
City-State-Zip: FORT PIERCE FL 34945

Title            DIRECTOR  
Name            HAYNES, JOE  
Address        8800 OKEECHOBEE ROAD  
                 LOT 26  
City-State-Zip: FORT PIERCE FL 34945

Title            DIRECTOR  
Name            HOWERTON, CARROLL  
Address        8800 OKEECHOBEE ROAD  
                 LOT 5  
City-State-Zip: FORT PIERCE FL 34945

*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:** DANIEL L BOARMAN

TREASURER

01/30/2024

Electronic Signature of Signing Officer/Director Detail

Date