

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P21000070628

**Entity Name:** SENTRIPOINT LENDING SOLUTIONS, INC

**Current Principal Place of Business:**

3111 NORTH UNIVERSITY DRIVE  
SUITE # 420  
CORAL SPRINGS, FL 33065

**Current Mailing Address:**

3111 NORTH UNIVERSITY DRIVE  
SUITE # 420  
CORAL SPRINGS, FL 33065 US

**FEI Number:** 87-2097456

**Certificate of Status Desired:** Yes

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

PALMER-LODGE, SATANYA  
3111 N. UNIVERSITY DR  
420  
CORAL SPRINGS, FL 33065 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  
Name            PALMER-LODGE, SATANYA  
Address        5778 NW 50TH DR  
City-State-Zip: CORAL SPRINGS FL 33067

Title            VP  
Name            LEE, EARON  
Address        2536 NW 124TH AVE  
City-State-Zip: CORAL SPRINGS FL 33065

*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:** SATANYA PALMER-LODGE

**PRESIDENT**

**02/09/2024**

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

\_\_\_\_\_  
Date