

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000093365

**Entity Name:** ARROYO INSURANCE SERVICES, INC.**Current Principal Place of Business:**440 E. HUNTINGTON DRIVE  
100  
ARCADIA, CA 91006**Current Mailing Address:**440 E. HUNTINGTON DRIVE  
100  
ARCADIA, CA 91006 US**FEI Number:** 95-4089708**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NATIONAL CORPORATE RESEARCH, LTD., INC.  
155 OFFICE PLAZA DRIVE  
TALLAHASSEE, FL 32301 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	OLHASSO, WILLIAM
Address	2900 W BROADWAY
City-State-Zip:	LOS ANGELES CA 90041

Title	VP
Name	ARMITAGE, JAMES TSR.
Address	440 E. HUNTINGTON DRIVE
City-State-Zip:	ARCADIA CA 91006

Title	SEC
Name	NEWSOM, BRUCE
Address	440 E HUNTINGTON DRIVE
City-State-Zip:	ARCADIA CA 91006

Title	TREA
Name	NEWSOM, BRUCE
Address	440 E HUNTINGTON DRIVE
City-State-Zip:	ARCADIA CA 91006

Title	VP
Name	KNAUF, ROBERT
Address	2900 W. BROADWAY
City-State-Zip:	LOS ANGELES CA 90041

*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:** JAMES T. ARMITAGE

VICE PRESIDENT

01/28/2013

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