

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000093365

Entity Name: ARROYO INSURANCE SERVICES, INC.

Current Principal Place of Business:

225 E. SANTA CLARA STREET, SUITE 130
ARCADIA, CA 91006

Current Mailing Address:

225 E. SANTA CLARA STREET, SUITE130
ARCADIA, CA 91006 US

FEI Number: 95-4089708

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

INCORP SERVICES, INC.
17888 67TH COURT NORTH
LOXAHATCHEE, FL 33470 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 PRESIDENT
Name KELLY, ROBERT
Address 3480 TORRANCE BLVD., STE. 301
City-State-Zip: TORRANCE CA 90503

Title DIRECTOR
Name WILLIAMS, TAYLOR
Address 3786 CRESCENTA AVE
 STE 204
City-State-Zip: GLENDALE CA 91208

Title TREASURER
Name MORELAND, KEITH
Address 1654 PLUM LANE
City-State-Zip: REDLANDS CA 92374

Title VP
Name SIMONDS, JAMES
Address 225 E. SANTA CLARA STREET, SUITE
 130
City-State-Zip: ARCADIA CA 91006

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: ROBERT KELLY

PRESIDENT

05/19/2022

Electronic Signature of Signing Officer/Director Detail

Date