

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000093365

**FILED**  
**May 01, 2018**  
**Secretary of State**  
**CC5194768597**

**Entity Name:** ARROYO INSURANCE SERVICES, INC.

**Current Principal Place of Business:**

225 E. SANTA CLARA STREET  
SUITE 120  
ARCADIA, CA 91006

**Current Mailing Address:**

225 E. SANTA CLARA STREET  
SUITE 120  
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            VP, DIRECTOR  
Name            ARMITAGE, JAMES T  
Address        225 E. SANTA CLARA STREET  
                 SUITE 120  
City-State-Zip: ARCADIA CA 91006

Title            CEO, PRESIDENT  
Name            HIGGINS, TOM  
Address        225 E. SANTA CLARA STREET  
                 SUITE 120  
City-State-Zip: ARCADIA CA 91006

Title            SECRETARY  
Name            WILLIAMS, TAYLOR  
Address        225 E. SANTA CLARA STREET  
                 SUITE 120  
City-State-Zip: ARCADIA CA 91006

Title            CFO, TREASURER  
Name            KNAUF, ROBERT  
Address        225 E. SANTA CLARA STREET  
                 SUITE 120  
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:** JAMES ARMITAGE

**VICE PRESIDENT**

**05/01/2018**

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

\_\_\_\_\_  
Date