

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000000155

FILED
Apr 29, 2008
Secretary of State

Entity Name: ARNOLD INVESTMENTS LIMITED, INC.

Current Principal Place of Business:

% THOMAS C. ROBERGE
ONE BEACH DR SE, SUITE 220
ST PETERSBURG, FL 33701

New Principal Place of Business:

Current Mailing Address:

% THOMAS C. ROBERGE
ONE BEACH DR SE, SUITE 220
ST PETERSBURG, FL 33701

New Mailing Address:

FEI Number: 98-0179473

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBERGE, THOMAS C
ONE BEACH DR SE, SUITE 220
ST PETERSBURG, FL 33701 US

Name and Address of New Registered Agent:

POSKUS, SUSAN I CPA
ONE BEACH DR SE, SUITE 220
ST PETERSBURG, FL 33701 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: SUSAN I POSKUS, CPA

04/29/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VC () Delete
Name: GOLDSBURY, ANTHONY M.D.
Address: TRADE WINDS, SUMMIT
City-St-Zip: HOWTH CO DUBLIN, IRELAND,

Title: D () Delete
Name: VALENTINE, JOE
Address: 65 MANOR HILL, BALLINCOLLIG
City-St-Zip: CORK, IRELAND,

Title: S () Delete
Name: O'BRIEN, MAEVE
Address: 11 BEWLEY GROVE WILLSBROOK WOODS
City-St-Zip: LUCAN CO DUBLIN, IRELAND,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VC (X) Change () Addition
Name: GOLDSBURY, ANTHONY M.D.
Address: C/O ONE BEACH DR SE STE 220
City-St-Zip: ST. PETERSBURG, FL 33701 US

Title: D (X) Change () Addition
Name: VALENTINE, JOE
Address: C/O ONE BEACH DR SE STE 220
City-St-Zip: ST. PETERSBURG, FL 33701 US

Title: S (X) Change () Addition
Name: O'BRIEN, MAEVE
Address: C/O ONE BEACH DR SE STE 220
City-St-Zip: ST. PETERSBURG, FL 33701 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MAEVE O'BRIEN

S

04/29/2008

Electronic Signature of Signing Officer or Director

Date