2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L50389

Entity Name: ARNOLA, INC.

FILED Feb 06, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

301 W. CAMINO GRDNS BLVD 5900 NORTH ANDREWS AVENUE

SUITE 101 SUITE 610

BOCA RATON, FL 33432 US FORT LAUDERDALE, FL 33309 US

Current Mailing Address: New Mailing Address:

301 W. CAMINO GRDNS BLVD 5900 NORTH ANDREWS AVENUE

SUITE 101 SUITE 610

BOCA RATON, FL 33432 US FORT LAUDERDALE, FL 33309 US

FEI Number: 65-0172043 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DEMPSEY, W. GLENN 505 S FLAGLER DR SUITE 1330

WEST PALM BEACH, FL 33401 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD () Delete Title: PSD (X) Change () Addition

Name: BAILEY, STEPHEN M., Name: BAILEY, STEPHEN M.,

Address: 301 W. CAMINO GARDENS BLVD, #101 Address: 5900 N. ANDREWS AVE., STE. 610 City-St-Zip: BOCA RATON, FL 33432 City-St-Zip: FORT LAUDERDALE, FL 33309

Title: VTD () Delete Title: VTD (X) Change () Addition

Name: BAILEY, GARY S., Name: BAILEY, GARY S.,

 Address:
 301 W. CAMINO GARDENS BLVD, #101
 Address:
 5900 N. ANDREWS AVE., STE.610

 City-St-Zip:
 BOCA RATON, FL 33432
 City-St-Zip:
 FORT LAUDERDALE, FL 33309

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: STEPHEN M. BAILEY PSD 02/06/2009