

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000138320

Entity Name: ARROW MORTGAGE SOLUTIONS, INC.

FILED
Apr 06, 2007
Secretary of State

Current Principal Place of Business:

11644 PARABLE CT
NEW PORT RICHEY, FL 34654

New Principal Place of Business:

575 NW 154TH STREET
NEWBERRY, FL 32669

Current Mailing Address:

11644 PARABLE CT
NEW PORT RICHEY, FL 34654

New Mailing Address:

575 NW 154TH STREET
NEWBERRY, FL 32669

FEI Number: 55-0907083

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

MOODY, SANDI A PTD
575 NW 154TH STREET
NEWBERRY, FL 32669 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: SANDI ANNE MOODY

04/06/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: MOODY, SANDI
Address: 11644 PARABLE CT
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: VPSD () Delete
Name: MOODY, GARY
Address: 11644 PARABLE CT
City-St-Zip: NEW PORT RICHEY, FL 34654

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: MOODY, SANDI
Address: 575 NW 154TH STREET
City-St-Zip: NEWBERRY, FL 32669

Title: VPSD (X) Change () Addition
Name: MOODY, GARY
Address: 575 NW 154TH STREET
City-St-Zip: NEWBERRY, FL 32669

I hereby certify that the information supplied with this filing does not qualify for the 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: SANDI A MOODY

PTD

04/06/2007

Electronic Signature of Signing Officer or Director

Date