

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000138320

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: ARROW MORTGAGE SOLUTIONS, INC.

## Current Principal Place of Business:

575 NW 154TH STREET  
NEWBERRY, FL 32669

## New Principal Place of Business:

10535 NW 36TH LANE  
GAINESVILLE, FL 32606

## Current Mailing Address:

575 NW 154TH STREET  
NEWBERRY, FL 32669

## New Mailing Address:

10535 NW 36TH LANE  
GAINESVILLE, FL 32606

FEI Number: 55-0907083

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

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

## Name and Address of New Registered Agent:

MOODY, GARY L PTD  
10535 NW 36TH LANE  
GAINESVILLE, FL 32606 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: CHERYL MOODY

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

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

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition  
Name: MOODY, GARY L  
Address: 10535 NW 36TH LANE  
City-St-Zip: GAINESVILLE, FL 32606

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: GARY L MOODY

PTD

04/30/2009

Electronic Signature of Signing Officer or Director

Date