

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000017962

FILED
Apr 17, 2009
Secretary of State

Entity Name: ARNOLD INSURANCE SERVICES, INC.

Current Principal Place of Business:

13575 58TH STREET N.
141
CLEARWATER, FL 33760 US

Current Mailing Address:

13575 58TH STREET N.
141
CLEARWATER, FL 33760 US

New Principal Place of Business:

2907 S.R. 590
11
CLEARWATER, FL 33759 US

New Mailing Address:

2907 STATE ROAD 590
11
CLEARWATER, FL 33759 US

FEI Number: 26-2004540

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARNOLD, ANDREW J
13575 58TH STREET N.
141
CLEARWATER, FL 33760 US

Name and Address of New Registered Agent:

ARNOLD, ANDREW J
24862 U.S. 19 N
805
CLEARWATER, FL 33763 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:

04/17/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ARNOLD, ANDREW J
Address: 13575 58TH STREET N. STE 141
City-St-Zip: CLEARWATER, FL 33760 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ARNOLD, ANDREW J
Address: 24862 U.S. 19 N #805
City-St-Zip: CLEARWATER, FL 33763 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: ANDREW ARNOLD

PRNP

04/17/2009

Electronic Signature of Signing Officer or Director

Date