

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10176

Entity Name: ARROW ELECTRIC CO., INC.

FILED
Apr 10, 2009
Secretary of State

Current Principal Place of Business:

317 WABASSO AVENUE
LOUISVILLE, KY 40209

New Principal Place of Business:

Current Mailing Address:

P O BOX 36215
LOUISVILLE, KY 40233

New Mailing Address:

FEI Number: 61-0532542

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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:

Title: CEO () Delete
Name: SAYLOR, HERBERT H
Address: 317 WABASSO AVENUE
City-St-Zip: LOUISVILLE, KY 40209

Title: P () Delete
Name: SAYLOR, H. BARRY
Address: 1103 SPRINGSIDE COURT
City-St-Zip: LOUISVILLE, KY 40299

Title: VP () Delete
Name: SAYLOR, SCOTT A
Address: 6123 LAUREL LANE
City-St-Zip: PROSPECT, KY 40059

Title: VP () Delete
Name: SAYLOR, MICHAEL H
Address: 311 CAMBRIDGE STATION ROAD
City-St-Zip: LOUISVILLE, KY 40223

Title: CFO () Delete
Name: ALLGEIER, ROBERT A
Address: 3702 FALLEN TIMBER DRIVE
City-St-Zip: LOUISVILLE, KY 40241

Title: D () Delete
Name: FRANCIS, JOHN
Address: 5832 BRITTANY WOODS CIRCLE
City-St-Zip: LOUISVILLE, KY 40222

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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Address:
City-St-Zip:

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

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: ROBERT A. ALLGEIER

CFO

04/10/2009

Electronic Signature of Signing Officer or Director

Date