

SCC eFile

2014 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION

214523334

1.) CORPORATION NAME:

**ARROW ENTERPRISE COMPUTING SOLUTIONS, INC.**

DUE DATE: **5/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**NATIONAL REGISTERED AGENTS INC  
4701 COX ROAD, SUITE 285  
GLEN ALLEN, VA**

SCC ID NO: **F1753062**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 7459 S LIMA STREET

CITY/ST/ZIP: ENGLEWOOD, CO 80112

7.) DIRECTORS AND PRINCIPAL OFFICERS:

All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	ANDREW BRYANT		
TITLE:	PRESIDENT		
ADDRESS:	7459 S LIMA ST		
CITY/ST/ZIP/CO:	ENGELWOOD, CO 80112		

		<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	PAUL J REILLY		
TITLE:	CFO / VP		
ADDRESS:	70 MAXESS ROAD		
CITY/ST/ZIP/CO:	MELVILLE, NY 11747		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	MICHAEL CASALE		
TITLE:	VICE PRESIDENT		
ADDRESS:	70 MAXESS ROAD		
CITY/ST/ZIP/CO:	MELVILLE, NY 11747		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	GREGORY TARPURIAN		
TITLE:	VP / GC		
ADDRESS:	70 MAXESS ROAD		
CITY/ST/ZIP/CO:	MELVILLE, NY 11747		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	GREGORY HANSON		
TITLE:	TREASURER		
ADDRESS:	7459 S LIMA ST		
CITY/ST/ZIP/CO:	ENGLEWOOD, CO 80112		

		<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	PETER S BROWN		
TITLE:	SVP /SECRETARY		
ADDRESS:	70 MAXESS ROAD		
CITY/ST/ZIP/CO:	MELVILLE, NY 11747		

NAME:	MICHAEL LONG	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	7459 S LIMA ST		
CITY/ST/ZIP/CO:	ENGLEWOOD, CO 80112		

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ MICHAEL CASALE	MICHAEL CASALE, VICE PRESIDENT	5/1/2014
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.