SEC Form 3

FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0104 Estimated average burden hours per response: 0.5

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person <sup>*</sup> Felletter John		2. Date of Even Requiring Stater (Month/Day/Yea	ment	3. Issuer Name <b>and</b> Ticker or Trading Symbol ARBOR REALTY TRUST INC [ABR]				
(Last) (First) C/O ARBOR REALTY T 333 EARLE OVINGTON (Street) UNIONDALE NY (City) (State)		11/05/2008		4. Relationship of Reporting Pers (Check all applicable) Director X Officer (give title below) Senior VP - Asset Ma	10% Own Other (spe below)	er 6. Ir	hth/Day/Year) ndividual or Joir licable Line) Form filed b Person	Date of Original Filed It/Group Filing (Check Iny One Reporting Iny More than One Person
Table I - Non-Deriv   1. Title of Security (Instr. 4)			2	tive Securities Beneficiall 2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership 4.		. Nature of Indirect Beneficial Ownership Instr. 5)	
	(e			e Securities Beneficially ants, options, convertible		s)		
1. Title of Derivative Security (Instr. 4)		2. Date Exercisable and Expiration Date (Month/Day/Year)		d 3. Title and Amount of Secur Underlying Derivative Secur 4)		4. Conversion or	Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
		Date Exercisable	Expiration Date	n Title	Amount or Number of Shares	Exercise Price of Derivative Security	Direct (D) or Indirect (I) (Instr. 5)	ct

Explanation of Responses:

Remarks:

No securities are beneficially owned.

/s/ John Felletter

\*\* Signature of Reporting Person Date

04/08/2010

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 $^{\ast}$  If the form is filed by more than one reporting person, see Instruction 5 (b)(v).

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.