SEC Form 3

FORM 3

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

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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 [*] Elenio Paul	2. Date of Event Requiring Statement (Month/Day/Year) 09/16/2005		3. Issuer Name and Ticker or Trading Symbol ARBOR REALTY TRUST INC [ABR]					
(Last) (First) (Middle)			l. Relationship of Reporting Pers Check all applicable)	.,	(5. If Amendment, Date of Original Filed (Month/Day/Year)		
C/O ARBOR REALTY TRUST 333 EARLE OVINGTON BLVD, SUITE 900			Director X Officer (give title below) Chief Financial C	10% Owner Other (specify below) Officer		6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One		
(Street) UNIONDALE NY 11553						Reporting F	•	
(City) (State) (Zip)								
Table I - Non-Derivative Securities Beneficially Owned								
1. Title of Security (Instr. 4)		1	eneficially Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)		
				(Instr. 5)				
Common Stock, par value \$0.01 per share			13,300(1)	(instr. 5)				
				D Owned	s)			
		arran	13,300 ⁽¹⁾ Securities Beneficially	D Owned securities	S) 4. Conversi or Exercise	Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)	

Explanation of Responses:

1. Restricted shares of common stock par value \$0.01 per share of Arbor Realty Trust, Inc. (the "Company") granted pursuant to the Company's 2003 Omnibus Stock Incentive Plan, as amended and restated. Remarks:

/s/ Paul Elenio

** Signature of Reporting Person Date

09/16/2005

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

 * 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.