FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

Name and Address of Reporting Person* Kilgore Gene			2. Date of Event Requiring States (Month/Day/Yea	ment	3. Issuer Name and Ticker or Trading Symbol ARBOR REALTY TRUST INC [ABR]						
(Last) C/O ARBOR 1 333 EARLE ((Street) UNIONDALE (City)	OVINGTON BI	(Middle) UST, INC. LVD., STE 900 11553 (Zip)	10/04/2004	4.		tionship of Reporting Per all applicable) Director Officer (give title below)	son(s) to Issu 10% Own Other (spe below)	er 	(Mont	th/Day/Year) lividual or Join cable Line) Form filed b Person	ate of Original Filed t/Group Filing (Check y One Reporting y More than One erson
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)				-	Amount of Securities Beneficially Owned (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		Nature of Indirect Beneficial Ownership (Instr. 5)		
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
1. Title of Derivative Security (Instr. 4)			2. Date Exercisable ar Expiration Date (Month/Day/Year)		3. Title and Amount of Secu Underlying Derivative Secu 4)			4. Convers	ion	5. Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
			Date Exercisable	Expiration Date	Amount Price or Deriv: Number Secur		Exercise Price of Derivativ Security	f or Indirect ive (I) (Instr. 5)			

Explanation of Responses:

Remarks:

No securities are beneficially owned.

/s/ Gene Kilgore

11/11/2004

** Signature of Reporting Person Date

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

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.

 $^{^{\}star}$ 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).