FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL 3235-0287 OMB Number:

hours per response:

Form filed by One Reporting Person Form filed by More than One Reporting Person

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0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

BOCA RATON

(City)

FL

(State)

33487

(Zip)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

ilistruction I(b).	iled pursuant to Section 10(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* Balodimas Staton Maria	2. Issuer Name and Ticker or Trading Symbol Armour Residential REIT, Inc. [ARR]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify			
Last) (First) (Middle) 5800 BROKEN SOUND PARKWAY	3. Date of Earliest Transaction (Month/Day/Year) 11/06/2009	below) Officer of Enterprise [EST]			
Street)	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable			

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										
1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)						5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1113411 4)
COMMON STOCK	11/06/2009		D		3,075,000(1)	D	(2)	69,150	I	By Staton Bell Blank Check LLC ⁽³⁾

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)	Instr.	5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr and 5	rative rities ired r osed)	Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
WARRANTS	\$11							11/06/2009	(4)	COMMON STOCK	3,750,000		3,750,000	I	By Staton Bell Blank Check LLC ⁽³⁾

Explanation of Responses:

- 1. In connection with the merger between ARMOUR Residential REIT, Inc. and Enterprise Acquisition Corp., which was consummated on November 6, 2009, Staton Bell Blank Check LLC forfeited 6,150,000 shares of Enterprise common stock which it held.
- 2. The 6,150,000 shares of common stock were cancelled by Continental Stock Transfer & Trust Co. There was no consideration.
- 3. Maria Balodimas Staton has 50% control of Staton Family Investments Ltd.; Staton Family Investments Ltd. is 50% owner of Staton Bell Blank Check LLC. Mrs. Staton may be deemed the beneficial owner of 50% of the issuer's securities held by Staton Bell Blank Check LLC. Mrs. Staton disclaims beneficial ownership of these securities except to the extent of any pecuniary interest therein.
- 4. The warrants will expire at 5:00 pm, New York City time, on November 7, 2013 or earlier upon redemption.

Remarks:

11/10/2009 /s/ Maria Balodimas Staton

** Signature of Reporting Person Date

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 4 (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.