2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2004 8:00 am
Secretary of State
02-09-2004 90040 029 ***150.00

DOCUMENT # H06472

1. Entity Name
AETNA HEALTH INC.

Principal Place of Business	Mailing Address
151 FARMINGTON AVE. HARTFORD, CT 06156	151 FARMINGTON AVE., W101 HARTFORD, CT 06156

01072004 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
5100 WEST LEMON STREET	
Suite, Apt. #, etc. SUITE 218	Suite, Apt. #, etc.
City & State TAMPA, FL	City & State
Zip 33609 Country U.S.	Zip Country

4. FEI Number
59-2411584
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
C T CORPORATION SYSTEM ~~120~~ SOUTH PINE ISLAND RD. PLANTATION, FL 33324	Name Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P BROWN, CHARLES T 151 FARMINGTON AVE. HARTFORD, CT 06156	☑ Delete	PD PECK, CHARLES A. 11675 GREAT OAKS WAY ALPHARETTA, GA 30022	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP MARTINO, GREGORY S 980 JOLLY RD,U19A BLUE BELL, PA 19422	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPT SMITH, RUSSELL P 151 FARMINGTON AVE. HARTFORD, CT 06156	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WEBB, JOHN J 11675 GREAT OAKS WAY ALPHARETTA, GA 30022	☑ Delete	D HAUSER, WILLIAM E JR. M.D. 11675 GREAT OAKS WAY ALPHARETTA, GA 30022	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP MARTIN, BLAKE W 151 FARMINGTON AVENUE,RE2R HARTFORD, CT 06156	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPS BASKIN, WILLIAM C III 151 FARMINGTON AVENUE,RC4B HARTFORDL, CT 06156	☐ Delete		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: BLAKE W. MARTIN 1/22/04 860 273-3521
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #