

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H06472

FILED  
Apr 27, 2010  
Secretary of State

Entity Name: AETNA HEALTH INC.

**Current Principal Place of Business:**

4630 WOODLANDS CORP BLVD  
TAMPA, FL 33614

**New Principal Place of Business:**

**Current Mailing Address:**

151 FARMINGTON AVE.,  
W101  
HARTFORD, CT 06156

**New Mailing Address:**

FEI Number: 59-2411584      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND RD.  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: KING, CLARENCE C  
Address: 4630 WOODLANDS CORP BLVD.  
City-St-Zip: TAMPA, FL 33614

Title: VP  
Name: MARTINO, GREGORY S  
Address: 980 JOLLY RD,U13A  
City-St-Zip: BLUE BELL, PA 19422

Title: VPT  
Name: COFRANCESCO, ELAINE R  
Address: 151 FARMINGTON AVE.  
City-St-Zip: HARTFORD, CT 06156

Title: PFOC  
Name: PALMA, JENNIFER A  
Address: 980 JOLLY RD  
City-St-Zip: BLUE BELL, PA 19422

Title: D  
Name: WIGHTMAN, DEBORAH M  
Address: 11675 GREAT OAKS WAY  
City-St-Zip: ALPHARETTA, GA 30022

Title: VPS  
Name: LEE, EDWARD C  
Address: 151 FARMINGTON AVENUE,RC4B  
City-St-Zip: HARTFORD, CT 06156

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: EDWARD C. LEE

VPS

04/27/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date