

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1-2

DOCUMENT # P28317 (6)

1. Corporation Name
AETNA CASUALTY COMPANY



Principal Place of Business: 1000 MIDDLE STREET, ATTN: STATE TEXAS, YF7J, MIDDLETOWN CT 06457-8500
Mailing Address: 151 FARMINGTON AVE, MC64, HARTFORD CT 06156 US

3. Date Incorporated or Qualified: 02/26/1990
3a. Date of Last Report: 02/28/1995
4. FEI Number: 06-1286276
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21 Suite, Apt. #, etc.; 22 City & State; 23 Zip; 24 Country
2a. Mailing Address: 26 Suite, Apt. #, etc.; 27 City & State; 28 Zip; 29 Country

9. Name and Address of Current Registered Agent
**INSURANCE COMMISSIONER
CAPITOL BUILDING
TALLAHASSEE FL 32399**

10. Name and Address of New Registered Agent
81 Name; 82 Street Address (P.O. Box Number is Not Acceptable); 83; 84 City; 85 Zip Code: FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS

| | | |
|----------------|-----------------------|---------|
| TITLE | V | DELETED |
| NAME | BROATCH, ROBERT E. | |
| STREET ADDRESS | 151 FARMINGTON AVENUE | |
| CITY-ST-ZIP | HARTFORD CT | |
| TITLE | DV | DELETED |
| NAME | BELL, CHARLES T. J | |
| STREET ADDRESS | 151 FARMINGTON AVENUE | |
| CITY-ST-ZIP | HARTFORD CT | |
| TITLE | S | DELETED |
| NAME | KLIPPEL, CHARLES H. | |
| STREET ADDRESS | 151 FARMINGTON AVENUE | |
| CITY-ST-ZIP | HARTFORD CT | |
| TITLE | PD | DELETED |
| NAME | MALTZ, ALLEN P. | |
| STREET ADDRESS | 151 FARMINGTON AVENUE | |
| CITY-ST-ZIP | HARTFORD CT | |
| TITLE | D | DELETED |
| NAME | HICKEY, KEVIN F. | |
| STREET ADDRESS | 151 FARMINGTON AVENUE | |
| CITY-ST-ZIP | HARTFORD CT | |
| TITLE | V | DELETED |
| NAME | SCOTT, BRIANE | |
| STREET ADDRESS | 151 FARMINGTON AVE | |
| CITY-ST-ZIP | HARTFORD CT | |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| | | |
|--------------------|---------------------------|--|
| 1.1 TITLE | DV | Change: <input checked="" type="checkbox"/> Addition: <input type="checkbox"/> |
| 1.2 NAME | Amin I. Khalifa | |
| 1.3 STREET ADDRESS | 151 Farmington Ave., MB66 | |
| 1.4 CITY-ST-ZIP | Hartford, CT. 06156 | |
| 2.1 TITLE | DV | Change: <input checked="" type="checkbox"/> Addition: <input type="checkbox"/> |
| 2.2 NAME | James A. Geyer | |
| 2.3 STREET ADDRESS | 151 Farmington Ave. | |
| 2.4 CITY-ST-ZIP | Hartford, CT. 06156 | |
| 3.1 TITLE | | Change: <input type="checkbox"/> Addition: <input type="checkbox"/> |
| 3.2 NAME | | |
| 3.3 STREET ADDRESS | | |
| 3.4 CITY-ST-ZIP | | |
| 4.1 TITLE | | Change: <input type="checkbox"/> Addition: <input type="checkbox"/> |
| 4.2 NAME | | |
| 4.3 STREET ADDRESS | | |
| 4.4 CITY-ST-ZIP | | |
| 5.1 TITLE | | Change: <input type="checkbox"/> Addition: <input type="checkbox"/> |
| 5.2 NAME | | |
| 5.3 STREET ADDRESS | | |
| 5.4 CITY-ST-ZIP | | |
| 6.1 TITLE | V | Change: <input checked="" type="checkbox"/> Addition: <input type="checkbox"/> |
| 6.2 NAME | Joel D. Thomison | |
| 6.3 STREET ADDRESS | 151 Farmington AVE. | |
| 6.4 CITY-ST-ZIP | Hartford, CT, 06156 | |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* 4/24/96 203-636-5798
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)

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Aetna Casualty Company

Directors:

| | | |
|-------------------------|-----------------------|----------------------------|
| Kevin F. Hickey | 151 Farmington Avenue | Hartford Connecticut 06156 |
| Allen P. Maltz | 151 Farmington Avenue | Hartford Connecticut 06156 |
| A. Bruce Campbell, M.D. | 151 Farmington Avenue | Hartford Connecticut 06156 |
| Frolly M. Boyd | 151 Farmington Avenue | Hartford Connecticut 06156 |
| James A. Geyer | 151 Farmington Avenue | Hartford Connecticut 06156 |
| Amin I. Khalifa | 151 Farmington Avenue | Hartford Connecticut 06156 |
| Thomas R. Williams | 151 Farmington Avenue | Hartford Connecticut 06156 |

Additional Officers:

| | | |
|--------------------|----------------------------|--|
| Allen P. Maltz | President | (See above) |
| Robert J. Colleran | Assistant Secretary | Aetna 151 Farmington Ave., MC64 Hartford, CT 06156-9154 |
| Charles H. Klippel | Assistant Secretary | Aetna 151 Farmington Ave., RE4C Hartford, CT 06156-9154 |
| James A. Geyer | Vice President and Actuary | Aetna 151 Farmington Ave., MB52 Hartford, CT. 06156-9154 |
| Robert J. Duquette | Assistant Treasurer | Aetna 151 Farmington Ave., MB65 Hartford, CT 06156-9154 |
| Amin I. Khalifa | Vice President and CFO | Aetna 151 Farmington Ave., MB66 Hartford, CT 06156-9154 |
| Joel D. Thomison | Vice President and Actuary | Aetna 151 Farmington Ave., MB52 Hartford, CT 06156-9154 |