

2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M1000000730

Entity Name: CORAC, LLC

Current Principal Place of Business:

900 COTTAGE GROVE ROAD
HARTFORD, CT 06152

Current Mailing Address:

900 COTTAGE GROVE ROAD
HARTFORD, CT 06152 US

FEI Number: 27-0268530

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

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

Authorized Person(s) Detail :

Title MEMBER
Name CIGNA HEALTH AND LIFE INSURANCE COMPANY
Address 900 COTTAGE GROVE ROAD
City-State-Zip: BLOOMFIELD CT 06002

Title MEMBER
Name CONNECTICUT GENERAL LIFE INSURANCE COMPANY
Address 900 COTTAGE GROVE ROAD
City-State-Zip: BLOOMFIELD CT 06002

Title MEMBER
Name LIFE INSURANCE COMPANY OF NORTH AMERICA
Address 1601 CHESTNUT STREET
TWO LIBERTY PLACE
City-State-Zip: PHILADELPHIA PA 19192

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CIGNA HEALTH AND LIFE INSURANCE COMPANY MEMBER

04/10/2018

Electronic Signature of Signing Authorized Person(s) Detail

_____ Date