

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F21000001419

Entity Name: CIGNA INTERNATIONAL SERVICES, INC.

FILED
Mar 11, 2023
Secretary of State
8416874672CC

Current Principal Place of Business:

TWO LIBERTY PLACE
1601 CHESTNUT ST
PHILADELPHIA, PA 19192

Current Mailing Address:

TWO LIBERTY PLACE
1601 CHESTNUT ST
PHILADELPHIA, PA 19192 US

FEI Number: 23-2610178

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T 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

Officer/Director Detail :

Title DIRECTOR
Name LEE, JENNIFER
Address TWO LIBERTY PLACE
1601 CHESTNUT ST
City-State-Zip: PHILADELPHIA PA 19192

Title PRESIDENT
Name SCHEIBE, DAVID
Address TWO LIBERTY PLACE
1601 CHESTNUT ST
City-State-Zip: PHILADELPHIA PA 19192

Title ASSISTANT SECRETARY
Name BERNIER, RHIANNON
Address TWO LIBERTY PLACE
1601 CHESTNUT ST
City-State-Zip: PHILADELPHIA PA 19192

Title VICE PRESIDENT
Name DILLON, TERENCE
Address TWO LIBERTY PLACE
1601 CHESTNUT ST
City-State-Zip: PHILADELPHIA PA 19192

Title ASSISTANT SECRETARY
Name GORODETZER, KRISTEN
Address TWO LIBERTY PLACE
1601 CHESTNUT ST
City-State-Zip: PHILADELPHIA PA 19192

Title TREASURER
Name HART, JOANNE
Address TWO LIBERTY PLACE
1601 CHESTNUT ST
City-State-Zip: PHILADELPHIA PA 19192

Title ASSISTANT SECRETARY
Name MAGERR, KATHLEEN
Address TWO LIBERTY PLACE
1601 CHESTNUT ST
City-State-Zip: PHILADELPHIA PA 19192

Title ASSISTANT SECRETARY
Name SCATURO, JOANNE
Address TWO LIBERTY PLACE
1601 CHESTNUT ST
City-State-Zip: PHILADELPHIA PA 19192

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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: SCOTT LAMBERT

AUTHORIZED SIGNOR

03/11/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title ASSISTANT SECRETARY
Name SHUBERT-COLEMAN, KELLY
Address TWO LIBERTY PLACE
1601 CHESTNUT ST
City-State-Zip: PHILADELPHIA PA 19192

Title AUTHORIZED SIGNOR
Name LAMBERT, SCOTT
Address TWO LIBERTY PLACE
1601 CHESTNUT ST
City-State-Zip: PHILADELPHIA PA 19192