

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P28317

**FILED  
Apr 10, 2014  
Secretary of State  
CC0998044474**

**Entity Name:** AETNA INSURANCE COMPANY OF CONNECTICUT

**Current Principal Place of Business:**

151 FARMINGTON AVENUE  
HARTFORD, CT 06156

**Current Mailing Address:**

151 FARMINGTON AVENUE  
HARTFORD, CT 06156 US

**FEI Number: 06-1286276**

**Certificate of Status Desired: No**

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

CHIEF FINANCIAL OFFICER  
200 E. GAINES ST.  
TALLAHASSEE, FL 32399 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            PRESIDENT  
Name            CWIERTNIEWICZ, CHERYL LYNN  
Address        151 FARMINGTON AVENUE  
City-State-Zip: HARTFORD CT 06156

Title            DIRECTOR, VP & CHIEF ACTUARY  
Name            FEDYNA, MICHAEL WILLIAM  
Address        151 FARMINGTON AVENUE  
City-State-Zip: HARTFORD CT 06156

Title            VP AND SECRETARY  
Name            LEE, EDWARD CHUNG-I  
Address        151 FARMINGTON AVENUE  
City-State-Zip: HARTFORD CT 06156

Title            VP AND TREASURER  
Name            COFRANCESCO, ELAINE ROSE  
Address        151 FARMINGTON AVENUE  
City-State-Zip: HARTFORD CT 06156

Title            VP, ASSISTANT SECRETARY  
Name            BELLIZZI, JERRY JOHN  
Address        151 FARMINGTON AVENUE  
City-State-Zip: HARTFORD CT 06156

Title            ASSISTANT TREASURER  
Name            TRAFTON, ERIC SIDNEY  
Address        151 FARMINGTON AVENUE  
City-State-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 CHUNG-I LEE**

**VP AND SECRETARY**

**04/10/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date