

# 2005 FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 821543

1. Entity Name  
CORPORATE HEALTH INSURANCE COMPANY



Principal Place of Business  
980 JOLLY ROAD  
BLUE BELL, PA 19422 US

Mailing Address  
151 FARMINGTON AVE  
W101  
HARTFORD, CT 06156 US

FILED  
05 JUL -7 PM 3:54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



06302005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
23-2710210

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

CT CORPORATION  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
Due by September 7, 2005**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the  
corporation did not receive the prior notice.

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
NORWOOD, FELICIA F  
100 N. RIVERSIDE PLAZA, 19TH FL  
CHICAGO, IL 60606

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DVS  
MARTINO, GREGORY S  
980 JOLLY ROAD  
BLUE BELL, PA 19422

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VP  
MARTIN, BLAKE W  
151 FARMINGTON AVENUE  
HARTFORD, CT 06156

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
SIO  
CASEY, KEVIN J  
151 FARMINGTON AVE  
HARTFORD, CT 06156

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VT  
SMITH, RUSSELL P  
151 FARMINGTON AVE  
HARTFORD, CT 06156

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DP  
FRANZOI, ROBERT J  
2201 RENAISSANCE BLVD  
KING OF PRUSSIA, PA 19406

600057218936  
07/08/05--01039--007 \*\*150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/30/2005

Date

80213-1324

Daytime Phone #

VICE PRESIDENT AND TREASURER  
Russell P. Smith