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CORPORATION ANNUAL REPORT
1995

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

APPROVED AND FILED

95 APR 20 AM 8:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **827838** **(4)**

1. Corporation Name
CIGNA REINSURANCE COMPANY

Principal Place of Business	Mailing Address
TWO LIBERTY PLACE 1601 CHESTNUT ST. PHILADELPHIA PA 19192	TWO LIBERTY PLACE 1601 CHESTNUT ST. PHILADELPHIA PA 19192

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **04/18/1972**
3a. Date of Last Report: **03/02/1994**

2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite, Apt. #, etc. (22)
Suite, Apt. #, etc. (27)
City & State (23)
City & State (28)
Zip (24) Country (25)
Zip (29) Country (30)

4. FEI Number: **23-1740414** ☐ Applied For ☐ Not Applicable

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

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
INSURANCE COMMISSIONER CAPITOL BLDG. TALLAHASSEE FL 32304	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City **FL** 85 Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	VPT	11 TITLE	V/T	☒ Change ☒ Addition
NAME	BLENDER, MARY FINKEL	12 NAME		
STREET ADDRESS	TWO LIBERTY PL, 1601 CHESTNUT ST	13 STREET ADDRESS		
CITY-ST-ZIP	PHILADELPHIA PA	14 CITY-ST-ZIP	19192	
TITLE	P	21 TITLE	P/D	☒ Change ☒ Addition
NAME	LARZELERE, HARRY J.	22 NAME	Armstrong, F. Michael	
STREET ADDRESS	1601 CHESTNUT ST.	23 STREET ADDRESS	1601 CHESTNUT ST.	
CITY-ST-ZIP	PHILADELPHIA PA	24 CITY-ST-ZIP	Philadelphia, PA. 19192	
TITLE	VAT	31 TITLE	S	☒ Change ☒ Addition
NAME	BERGSTEINSSON, PAUL	32 NAME	Mulligan, George	
STREET ADDRESS	1601 CHESTNUT ST.	33 STREET ADDRESS	1601 CHESTNUT ST	
CITY-ST-ZIP	PHILADELPHIA PA	34 CITY-ST-ZIP	19192 PHILA. PA. 19192	
TITLE	C	41 TITLE		☐ Change ☒ Addition
NAME	SEAVER, JAMES J JR.	42 NAME		
STREET ADDRESS	1601 CHESTNUT ST	43 STREET ADDRESS		
CITY-ST-ZIP	PHILADELPHIA PA	44 CITY-ST-ZIP	19192	
TITLE	VP	51 TITLE	V	☒ Change ☒ Addition
NAME	MOHONEY, THOMAS J	52 NAME	Tivon, Robert P.	
STREET ADDRESS	TWO LIBERTY PL, 1601 CHESTNUT ST	53 STREET ADDRESS	1601 CHESTNUT STREET	
CITY-ST-ZIP	PHILADELPHIA PA	54 CITY-ST-ZIP	19192	
TITLE	VP	61 TITLE	V	☒ Change ☐ Addition
NAME	ROHRBEKEMPER, PAUL H	62 NAME		
STREET ADDRESS	TWO LIBERTY PL, 1601 CHESTNUT	63 STREET ADDRESS		
CITY-ST-ZIP	PHILADELPHIA PA	64 CITY-ST-ZIP	19192	

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)(i), 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: George D. Mulligan 4/13/95 (215) 761-2907
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0008140 CP

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CIGNA REINSURANCE COMPANY (169)

ADDRESS:
TWO LIBERTY PLACE, 1601 CHESTNUT STREET
PHILADELPHIA
PENNSYLVANIA 19192

TELEPHONE:
(215) 761-1000

OWNERSHIP: INA FINANCIAL CORPORATION - 100%

DIRECTORS

HAROLD W ALBERT	MEMBER OF INVESTMENT COMMITTEE
F. MICHAEL ARMSTRONG	
ROBERT W BURGESS	MEMBER OF INVESTMENT COMMITTEE
JOSEPH R LIUZZI	
GERALDINE F PRUSKO	
ARTHUR C. REEDS, III	CHAIRMAN OF INVESTMENT COMMITTEE
MARK E SCHULTZE	

OFFICERS

F. MICHAEL ARMSTRONG	PRESIDENT
BARRY L. ADAMS	VICE PRESIDENT
	ASSISTANT TREASURER
PAUL BERGSTEINSSON	VICE PRESIDENT
	ASSISTANT TREASURER
MARCY F BLENDER	VICE PRESIDENT
	TREASURER
GEORGE E HARTZ, III	VICE PRESIDENT
✓ JOHN J HOPKINSON	VICE PRESIDENT
	SECRETARY
ROBERT P IRVAN	VICE PRESIDENT
	CHIEF ACTUARY
✓ THOMAS J MAHONEY	VICE PRESIDENT
PAUL H. ROHRKEMPER	VICE PRESIDENT
JAMES A SEARS	VICE PRESIDENT
BONNIE B JONES	CHIEF COUNSEL

AS OF: 03/31/95

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CIGNA REINSURANCE COMPANY (1RE)

	JOANN L DE BLASIS	ASSISTANT VICE PRESIDENT
✓	PHILIP GRUENDER	ASSISTANT VICE PRESIDENT
✓	R. RAYFORD GUILD	ASSISTANT VICE PRESIDENT
	LAWRENCE H LEVERETT	ASSISTANT VICE PRESIDENT
	GRAHAM J MEARS	ASSISTANT VICE PRESIDENT
	DONNA M PETERSON	ASSISTANT VICE PRESIDENT
	JAMES J SEAVER, JR.	CONTROLLER
	GEORGE D MULLIGAN	CORPORATE SECRETARY
	JAMES J NERI	SECRETARY
	ILANA G HESSING	ASSISTANT CORPORATE SECRETARY
	RICHARD F. BETZLER, JR.	ASSISTANT SECRETARY
✓	BARBARA R GUENTHER	ASSISTANT SECRETARY
	JOAN M KENNEDY	ASSISTANT SECRETARY
	GAIL F LASKOWITZ	ASSISTANT SECRETARY
	KATHLEEN P MAGERR	ASSISTANT SECRETARY
	JEROLD H ROSENBLUM	ASSISTANT SECRETARY
	BRIAN W VILLALOBOS	ASSISTANT TREASURER

AS OF: 03/31/95