

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 31, 2008 8:00 am
Secretary of State

03-31-2008 90037 016 ***150.00

DOCUMENT # 848979

1. Entity Name
CIGNA DIRECT MARKETING COMPANY, INC.



Principal Place of Business
1601 CHESTNUT ST
PHILADELPHIA, PA 19192 US

Mailing Address
1601 CHESTNUT ST
TD23B CAROLYN CALDWELL
PHILADELPHIA, PA 19192 US



03052008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
58-1136865

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. 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
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	VP
NAME	MCHALE, BARRY R
STREET ADDRESS	1601 CHESTNUT ST
CITY-ST-ZIP	PHILADELPHIA, PA 19192
TITLE	S
NAME	COOPER, SUSAN
STREET ADDRESS	900 COTTAGE DRIVE
CITY-ST-ZIP	BLOOMFIELD, CT 06002
TITLE	AS
NAME	MARKOE, JOAN A.
STREET ADDRESS	879 N STILLMAN STREET
CITY-ST-ZIP	PHILADELPHIA, PA 19192
TITLE	AVP
NAME	TALERICO, MICHAEL
STREET ADDRESS	1601 CHESTNUT ST
CITY-ST-ZIP	PHILADELPHIA, PA 19192
TITLE	P
NAME	JACOBSON, JAMES E
STREET ADDRESS	1601 CHESTNUT ST
CITY-ST-ZIP	PHILADELPHIA, PA 19192
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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

03/08/08 215.761.6072

Date

Daytime Phone #

Corporate Profile System

ATTACHMENT

281

CIGNA DIRECT MARKETING COMPANY, INC.

FORMERLY: MEMBERSHIP ASSISTANCE CORPORATION

848979

ADDRESS:

TWO LIBERTY PLACE
PHILADELPHIA
PA 19192

40055836

TELEPHONE:

(215) 761-1000

OWNERSHIP: LIFE INSURANCE COMPANY OF NORTH AMERICA - 100%

DIRECTORS

JAMES E. JACOBSEN
LANIA A. PETERSON
KAREN S. ROHAN
MICHAEL J. TALARICO

OFFICERS

JAMES E. JACOBSEN
SCOTT R. LAMBERT

BARRY R. MCHALE

DAVID M. PORCELLO

LANIA A. PETERSON
MICHAEL J. TALARICO
SUSAN L. COOPER
ANDREA B. DANIELS
SHEILA K. DUBINSKY
JOAN A. MARKOE
LAURIEANN TUTTLE
WILLIAM F. WALSH
JOHN P. FREY
STEVEN J. PLATT
THERESA PRESS
MAUREEN H. RYAN

PRESIDENT
VICE PRESIDENT
TREASURER
VICE PRESIDENT
ASSISTANT TREASURER
VICE PRESIDENT
ASSISTANT TREASURER
ASSISTANT VICE PRESIDENT
ASSISTANT VICE PRESIDENT
CORPORATE SECRETARY
ASSISTANT SECRETARY
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ASSISTANT SECRETARY
ASSISTANT SECRETARY
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