


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2005 8:00 am
Secretary of State

04-21-2005 90225 042 ***150.00

DOCUMENT # 853656 1. Entity Name LINCOLN NATIONAL INSURANCE ASSOCIATES, INC.					
Principal Place of Business 350 CHURCH ST. MCA 1 HARTFORD, CT 06103			Mailing Address % TRINA MILLS P O BOX 2239 FORT WAYNE, IN 46801-2239		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 06-1064919	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301			Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DINEEN, ROBERT W 2001 MARKET STREET PHILADELPHIA, PA 19103 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Dineen, Robert W. 2005 Market Street, 34th Floor Philadelphia, PA 19103 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BYRER, JOYCE L 1300 SOUTH CLINTON STREET FORT WAYNE, IN 46802 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Ondecker, Marilyn K. 1300 South Clinton Street Fort Wayne, IN 46802 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS MILLS, TRINA 1300 SOUTH CLINTON STREET., STE. 150 FORT WAYNE, IN 46802 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT CRAWFORD, FREDRICK J 1500 MARKET ST, STE 3900 PHILADELPHIA, PA 191022112 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAS Gase, Lucy D. 1300 South Clinton Street, Ste. 150 Fort Wayne, IN 46802 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVCFD Trumble, Casey J. 2005 Market Street, 34th Floor Philadelphia, PA 19103 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
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: <i>Trina Mills</i> Trina Mills, Asst. Secretary 4/14/05 260-455-2562 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

ATTACHMENT 40063909
853656

Lincoln National Insurance Associates, Inc.
(Formerly CIGNA Associates, Inc.)

OFFICERS AND DIRECTORS

<u>NAME & TITLE</u>	<u>BUSINESS ADDRESS</u>	<u>RESIDENCE ADDRESS</u>
Robert W. Dineen President and Director	2005 Market Street, 34th Floor Philadelphia, PA 19103	65 2nd Avenue Westwood, NJ 07675
Casey J. Trumble Senior VP & CFO & Director	2005 Market Street, 34th Floor Philadelphia, PA 19103	507 Anthony's Drive Exton, PA 19341
Frederick J. Crawford Vice President and Treasurer	1500 Market Street, Suite 3900 Philadelphia, PA 19102-2112	8345 Chesney Lane Cincinnati, OH 45249
Lucy D. Gase VP & Asst. Secretary & Director	1300 South Clinton Street, Ste 150 Fort Wayne, IN 46802	420 East Cedar Canyon Road Huntertown, IN 46748
Deborah C. Zahorodni Vice President	350 Church Street Hartford, CT 06103-1106	111 North Saddle Ridge Drive West Simsbury, CT 06092
Marilyn K. Ondecker Secretary	1300 South Clinton Street Fort Wayne, IN 46802	1012 Abbey Place Blvd. Fort Wayne, IN 46804
Trina Mills Assistant Secretary	1300 South Clinton Street, Ste 150 Fort Wayne, IN 46802	15304 Lions Passage Leo, IN 46765

January, 2005