2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01957

Entity Name: HARTFORD LIFE GROUP INSURANCE COMPANY

FILED May 23, 2006 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
200 HOPMEADOW STREET SIMSBURY, CY 06089 US				200 HOPMEADOW STREET SIMSBURY, CT 06089 US			
Current Mailing Address:				New Mailing Address:			
200 HOPMEADOW STREET SIMSBURY, CY 06089 US				200 HOPMEADOW STREET SIMSBURY, CT 06089 US			
FEI Number:	: 73-6095123	FEI Number Applied For ()	FEI Numb	er Not Appli	cable ()	Certifica	te of Status Desired()
Name and	Address of C	urrent Registered Agent:	N	lame and	Address of I	New Reg	istered Agent:
P O BOX 6 200 E. GAI TALLAHAS	SSEE, FL 3239	00) 990000 US				55.	
	named entity s e of Florida.	submits this statement for the p	urpose of c	changing it	s registered (office or re	egistered agent, or both,
SIGNATUR	RE:						
	Electron	ic Signature of Registered Age	ent .				Date
Election Car		3(2)(b), F.S., the corporation did no J Trust Fund Contribution(). 「ORS:				TO OFF	ICERS AND DIRECTORS
Title: Name: Address: City-St-Zip:	D (X) HALPER, DAVID 4245 MERIDIAN AURORA, IL 60	IPKWY	N A	itle: lame: ddress: ity-St-Zip:	() Change() Addition
Title: Name: Address: City-St-Zip:	PDC () MARRA, THOM/ 200 HOPMEADO SIMSBURY, CT	TS WC	N A	itle: lame: ddress: ity-St-Zip:	P/D (X MARRA, THOM 200 HOPMEAL SIMSBURY, C	DOW ST	*
Title: Name: Address: City-St-Zip:	D () MURPHY, CARO TWO N LASALL CHICAGO, IL 6	E ST 2ND FL	N A	itle: lame: ddress: ity-St-Zip:	() Change() Addition
Title: Name: Address: City-St-Zip:	EVP () ZLATKUS, LIZA 200 HOPMEADO SIMSBURY, CT	TS WC	N A	itle: lame: ddress: tity-St-Zip:	VP (XZLATKUS, LIZZ 200 HOPMEAL SIMSBURY, C	DOW ST) Addition
Title: Name: Address: City-St-Zip:	SVPT () GIAMALIS, JOH HARTFORD PLA HARTFORD, CT	AZA	N A	itle: lame: ddress: tity-St-Zip:	VP/T (X GIAMALIS, JO HARTFORD PI HARTFORD, C	_AZA) Addition
Title: Name: Address: City-St-Zip:	SVPS () BECKER, BRIAI HARTFORD PLARTFORD, CT	4ZA	N A	itle: lame: ddress: :itv-St-Zip:	VP/S (X COSTELLO, R HARTFORD PI	_AZA) Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: RICHARD G. COSTELLO VP/S 05/23/2006