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PROFIT
CORPORATION
ANNUAL REPORT

1998

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

Mailed 2/27/98

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98 MAY 22 PM 4:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Res

DOCUMENT # **P06797** **(5)**

1. Corporation Name
ITT COMPREHENSIVE EMPLOYEE BENEFIT SERVICE COMPA NY

Principal Place of Business	Mailing Address
HARTFORD PLAZA, TAX DIVISION HARTFORD CT 06115	DOLORES J. MORROW, HARTFORD LIFE, INC. 200 HOPMEADOW STREET SIMSBURY CT 06070

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/19/1985

2. Principal Place of Business
21 Hartford Plaza
Suite, Apt. #, etc.
22 690 Asylum Avenue
City & State
23 Hartford, CT
Zip 24 06104 Country 25 USA

2a. Mailing Address
26 P.O. Box 2999
Suite, Apt. #, etc.
27 –
City & State
28 Hartford, CT
Zip 29 06104 Country 30 USA

4. FEI Number: 06-1120503 ☐ 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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83 Not Applicable
84 City FL 85 Zip Code

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****150.00 ****150.00

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

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P and Director	☐ DELETE	1.1 TITLE	Vice President	☐ Change ☒ Addition
NAME	WELNICKI, RAYMOND P		1.2 NAME	Timothy Schiltz	
STREET ADDRESS	43 PONDVIEW DR		1.3 STREET ADDRESS	10 Old King's Road	
CITY-ST-ZIP	MANCHESTER CT		1.4 CITY-ST-ZIP	Avon, CT	
TITLE	VP	☒ DELETE	2.1 TITLE	Sr. VP,CFO & Treasurer	☒ Change ☐ Addition
NAME	AREAU, JOSEPH H		2.2 NAME	Gregory A. Boyko	
STREET ADDRESS	456E CHIMNEY SWEEP HILL		2.3 STREET ADDRESS	100 Barbourtown Rd.	
CITY-ST-ZIP	GLASTONBURY CT		2.4 CITY-ST-ZIP	Collinsville, CT 06022	
TITLE	VP	☒ DELETE	3.1 TITLE	Sr. VP, Gen'l Counsel & Corp. Secretary	☐ Change ☒ Addition
NAME	GARRET, J RICHARD		3.2 NAME	Lynda Godkin	
STREET ADDRESS	26 MARY CATHERINE CIRCLE		3.3 STREET ADDRESS	11 Duncaster Wood Rd.	
CITY-ST-ZIP	WINDSOR CT		3.4 CITY-ST-ZIP	Granby, CT 06035	
TITLE	VP and Director	☐ DELETE	4.1 TITLE	Assist. Vice President	☐ Change ☒ Addition
NAME	GINNETTI, JOHN P		4.2 NAME	Frederick R. Jeans, Jr.	
STREET ADDRESS	8 GRANT ESTATE DR		4.3 STREET ADDRESS	614 Steele Road	
CITY-ST-ZIP	W SIMSBURY CT		4.4 CITY-ST-ZIP	New Hartford, CT	
TITLE	T	☒ DELETE	5.1 TITLE	Assistant Vice President	☐ Change ☒ Addition
NAME	WAGGAMAN JR, DONALD E		5.2 NAME	Raymond J. Marra	
STREET ADDRESS	5 SADDLERIDGE DR		5.3 STREET ADDRESS	7 Cobtail Way	
CITY-ST-ZIP	W SIMSBURYT CT		5.4 CITY-ST-ZIP	Simsbury, CT	
TITLE	AS	☐ DELETE	6.1 TITLE	Assistant Vice President	☐ Change ☒ Addition
NAME	JAMES CABANSKI		6.2 NAME	Richard R. Mourey	
STREET ADDRESS	59 BIWELL ST		6.3 STREET ADDRESS	85 North Main 49	
CITY-ST-ZIP	GLASTONBURY CT		6.4 CITY-ST-ZIP	East Hampton, CT 06424	

(continue next pg)

CR2E034 (10/97)

14. 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 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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

1.1Title	Assistant Secretary
1.2Name	Joseph Tedesco
1.3Street Address	18 Newbury
1.4City-St-Zip	Simsbury, CT 06104