

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P26554

FILED
Apr 26, 2012
Secretary of State

Entity Name: CIGNA BEHAVIORAL HEALTH, INC.

Current Principal Place of Business:

11095 VIKING DR., STE 350
EDEN PRAIRIE, MN 55344

New Principal Place of Business:

11095 VIKING DR., STE 350
EDEN PRAIRIE, MN 55344 US

Current Mailing Address:

11095 VIKING DR., STE 350
EDEN PRAIRIE, MN 55344

New Mailing Address:

11095 VIKING DR., STE 350
EDEN PRAIRIE, MN 55344 US

FEI Number: 41-1648670

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PDIR
Name: COHEN, NEAL M PDIR
Address: 11095 VIKING DR., STE 350
City-St-Zip: EDEN PRAIRIE, MN 55344 US

Title: TVP
Name: LAMBERT, SCOTT R TVP
Address: 11095 VIKING DR., STE 350
City-St-Zip: EDEN PRAIRIE, MN 55344 US

Title: SEC
Name: MAPP, SHERMONA SEC
Address: 11095 VIKING DR., STE 350
City-St-Zip: EDEN PRAIRIE, MN 55344 US

Title: DIR
Name: BRUNDIN, KELLY R DIR
Address: 11095 VIKING DR., STE 350
City-St-Zip: EDEN PRAIRIE, MN 55344 US

Title: DIR
Name: CIERZAN, KAREN K DIR
Address: 11095 VIKING DR., STE 350
City-St-Zip: EDEN PRAIRIE, MN 55344 US

I hereby 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 all other like empowered.

SIGNATURE: LAURA LOUIS

POA

04/26/2012

Electronic Signature of Signing Officer or Director

Date