## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P28317

FILED Apr 11, 2008 Secretary of State

Entity Name: AETNA INSURANCE COMPANY OF CONNECTICUT

| Current Principal Place of Business:   |   |   | New Princ  | New Principal Place of Business:  |  |
|--|---|---|--|---|--|
|  | NGTON AVEN<br>D, CT 06156   | UE<br>US  |  |   |  |
| Current Mailing Address:   |   |   | New Mailir   | ng Address:   |  |
| 151 FARMI<br>W101  | NGTON AVEN  | UE  |  |   |  |
|  | D, CT 06156   | US  |  |   |  |
| FEI Number:  | 06-1286276  | FEI Number Applied For ( )                        | FEI Number Not Appli   | cable ( ) Certificate of Status Desired ( )   |  |
| Name and   | Address of Cu   | ırrent Registered Agent:                          | Name and   | Address of New Registered Agent:  |  |
| P.O.BOX 6:<br>200 E. GAII<br>TALLAHAS  | SEE, FL 32399<br>named entity su  | )<br>9 US   | pose of changing it  | s registered office or registered agent, or both,   |  |
|  |   |   |  |   |  |
| SIGNATUR   |   | Signature of Registered Agent                     | <u> </u>   | <br>Date  |  |
| Election Carr  |   | Trust Fund Contribution ( ).                      |  | 2   |  |
| OFFICERS   | AND DIRECT  | ORS:  | ADDITION   | S/CHANGES TO OFFICERS AND DIRECTORS:  |  |
| Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title:     | BENNETT, ALAN<br>151 FARMINGTO<br>HARTFORD, CT<br>VPD () I<br>GEYER, JAMES<br>151 FARMINGTO<br>HARTFORD, CT   | ON AVENUE<br>06156 US<br>Delete<br>A<br>ON AVENUE | Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title:     | PD (X) Change ( ) Addition  ZUBRETSKY, JOSOPH M  151 FARMINGTON AVENUE  HARTFORD, CT 06156 US  C (X) Change ( ) Addition  ALFANO, JOSEPH A  151 FARMINGTON AVENUE  HARTFORD, CT 06156 US  ( ) Change ( ) Addition |  |
| Name:<br>Address:<br>City-St-Zip:<br>Title:<br>Name:<br>Address:<br>City-St-Zip: | MARTINO, GREG<br>980 JOLLY ROA<br>BLUEBELL, PA<br>VAS () I<br>KRAMER, WILLI,<br>980 JOLLY ROA<br>BLUEBELL, PA | D<br>19422<br>Delete<br>AM I<br>D                 | Name:<br>Address:<br>City-St-Zip:<br>Title:<br>Name:<br>Address:<br>City-St-Zip: | ()Change()Addition  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:                                      | VT ()[<br>COFRANCESCO<br>151 FARMINGTO<br>HARTFORD, CT  | N AVE.  | Title:<br>Name:<br>Address:<br>City-St-Zip:                                      | () Change () Addition   |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:                                      | VC ()[<br>MAHONEY, STEF<br>151 FARMINGTO<br>HARTFORD, CT  | N AVE.  | Title:<br>Name:<br>Address:<br>City-St-Zip:                                      | AS (X) Change ( ) Addition<br>LEE, EDWARD C<br>151 FARMINGTON AVE.<br>HARTFORD, CT 06156  |  |

I hereby certify that the information supplied with this filing does not qualify 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: EDWARD C. LEE AS 04/11/2008