

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H06472

FILED
Apr 23, 2024
Secretary of State
2352708768CC

Entity Name: AETNA HEALTH INC.

Current Principal Place of Business:

261 NORTH UNIVERSITY DRIVE
PLANTATION, FL 33324

Current Mailing Address:

261 NORTH UNIVERSITY DRIVE
PLANTATION, FL 33324 US

FEI Number: 59-2411584

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION, FL 33324 US

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

Officer/Director Detail :

Title VICE PRESIDENT AND TREASURER
Name SMITH, TRACY LOUISE
Address 261 NORTH UNIVERSITY DRIVE
City-State-Zip: PLANTATION FL 33324

Title DIRECTOR
Name JACKSON, EVELYN WYNN
Address 261 NORTH UNIVERSITY DRIVE
City-State-Zip: PLANTATION FL 33324

Title PRESIDENT
Name WEISS, RICHARD BRYAN
Address 261 NORTH UNIVERSITY DRIVE
City-State-Zip: PLANTATION FL 33324

Title DIRECTOR
Name WEISS, RICHARD BRYAN
Address 261 NORTH UNIVERSITY DRIVE
City-State-Zip: PLANTATION FL 33324

Title DIRECTOR
Name FINKELMAN, ROBERT JAY
Address 261 NORTH UNIVERSITY DRIVE
City-State-Zip: PLANTATION FL 33324

Title VICE PRESIDENT AND SECRETARY
Name LEE, EDWARD CHUNG-I
Address 151 FARMINGTON AVENUE
RW61
City-State-Zip: HARTFORD CT 06156

Title VP
Name GROZIO, KEVIN J.
Address 261 NORTH UNIVERSITY DRIVE
City-State-Zip: PLANTATION FL 33324

Title ASSISTANT VICE PRESIDENT
Name POLSONETTI, TAMI
Address 261 NORTH UNIVERSITY DRIVE
City-State-Zip: PLANTATION FL 33324

Continues on page 2

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: EDWARD CHUNG-I LEE

SECRETARY

04/23/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title ASSISTANT TREASURER
Name CHUEY, LINDSAY A
Address 261 NORTH UNIVERSITY DRIVE
City-State-Zip: PLANTATION FL 33324

Title ASSISTANT TREASURER
Name PARR, MARC A
Address 261 NORTH UNIVERSITY DRIVE
City-State-Zip: PLANTATION FL 33324

Title ASSISTANT SECRETARY
Name CIANCI, WENDYANN M
Address 261 NORTH UNIVERSITY DRIVE
City-State-Zip: PLANTATION FL 33324

Title ASSISTANT SECRETARY
Name NOWROOZI, LEILA
Address 261 NORTH UNIVERSITY DRIVE
City-State-Zip: PLANTATION FL 33324

Title ASSISTANT TREASURER
Name HEALY, , ROBERT SEAN
Address 261 NORTH UNIVERSITY DRIVE
City-State-Zip: PLANTATION FL 33324

Title ASSISTANT SECRETARY
Name BEAULIEU, SHEELAGH M
Address 261 NORTH UNIVERSITY DRIVE
City-State-Zip: PLANTATION FL 33324

Title ASSISTANT SECRETARY
Name COLE, JOSHUA C
Address 261 NORTH UNIVERSITY DRIVE
City-State-Zip: PLANTATION FL 33324