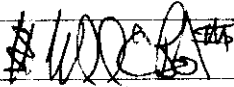


No. W 30239	Due no later than April 30, 2005 Annual Report Form		2. Registered Agent and Office NO PO BOX CT CORPORATION SYSTEM 300 N 6TH ST BOISE, ID 83702												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable AETNA HEALTH MANAGEMENT, LLC 156 FARMINGTON AVE W101 HARTFORD, CT 06156														
4. Limited Liability Companies: Enter Names and Addresses of Members. <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>MEMBER</td> <td>AETNA HEALTH HOLDINGS, LLC</td> <td>151 FARMINGTON AVE.</td> <td>HARTFORD</td> <td>CT</td> <td>06156</td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip	MEMBER	AETNA HEALTH HOLDINGS, LLC	151 FARMINGTON AVE.	HARTFORD	CT	06156	3. New Registered Agent Signature
Office held	Name	Street or P.O. Address	City	State	Zip										
MEMBER	AETNA HEALTH HOLDINGS, LLC	151 FARMINGTON AVE.	HARTFORD	CT	06156										
5. Organized Under the Laws of: DELAWARE W 30239		6.  Signature _____ Date _____ Name <small>(Typed or Printed)</small> WILLIAM C. BASKIN, III Title ASST. SECY OF SOLE MBR.													