



ANNUAL STATEMENT
 FOR THE YEAR ENDED DECEMBER 31, 2010
 OF THE CONDITION AND AFFAIRS OF THE
Antilles Insurance Company

NAIC Group Code 0000, _____, NAIC Company Code 10308 Employer's ID Number 98-4207369
(Current Period) (Prior Period)

Organized under the Laws of Commonwealth of Puerto Rico, State of Domicile or Port of Entry Puerto Rico

Country of Domicile US

Incorporated/Organized October 8, 1968 Commenced Business January 1, 1969

Statutory Home Office 500 de la Tanca Street, San Juan, Puerto Rico 00902
(Street and Number, City or Town, State and Zip Code)

Main Administrative Office 500 de la Tanca Street, San Juan, Puerto Rico 00902 787-474-4900
(Street and Number, City or Town, State and Zip Code) (Area Code) (Telephone Number)

Mail Address PO Box 9023507, San Juan, Puerto Rico 00902-3507
(Street and Number or P. O. Box, City or Town, State and Zip Code)

Primary Location of Books and Records 500 de la Tanca Street, San Juan, Puerto Rico 00902
(Street and Number, City or Town, State and Zip Code)
787-474-4900
(Area Code) (Telephone Number)

Internet Website Address www.anglo-antilles.com

Statutory Statement Contact Roberto F Fortuno 787-474-4900 -205
(Name) (Area Code) (Telephone Number) (Extension)
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OFFICERS

Jaime J Gonzalez (President, CEO)
 Herman W Colberg (Secretary)
 Roberto F Fortuno (Treasurer)

OTHER OFFICERS

Domingo Picorelli
 Roberto J Lopez
 Patrick Aleman

DIRECTORS OR TRUSTEES

Herman W Colberg
 Jaime J Gonzalez
 Robert F Fortuno
 Juan B Zamora
 Alberto E Gonzalez
 Celeste L Gonzalez
 Domingo Picorelli
 Carlos R Rios
 Eduardo J Ramos

State of Puerto Rico }
 County of _____ } SS

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

 Jaime J Gonzalez
 President, CEO

 Herman W Colberg
 Secretary

 Roberto F Fortuno
 Treasurer

Subscribed and sworn to before me this
 24 day of February, 2011

- a. Is this an original filing? Yes (X) No ()
 b. If no: 1. State the amendment number _____
 2. Date filed _____
 3. Number of pages attached _____

ASSETS

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Column 1 minus Column 2)	4 Net Admitted Assets
1. Bonds (Schedule D)	57,719,058		57,719,058	53,527,803
2. Stocks (Schedule D):				
2.1 Preferred stocks				
2.2 Common stocks	6,819,663		6,819,663	9,384,353
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens	4,251,030		4,251,030	4,261,030
3.2 Other than first liens				
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$ encumbrances)				
4.2 Properties held for the production of income (less \$ encumbrances)				
4.3 Properties held for sale (less \$ encumbrances)				
5. Cash (\$ 7,126,369 , Schedule E - Part 1), cash equivalents (\$, Schedule E - Part 2) and short-term investments (\$ 613,709 , Schedule DA)	7,740,077		7,740,077	3,913,551
6. Contract loans (including \$ premium notes)				
7. Derivatives				
8. Other invested assets (Schedule BA)				
9. Receivables for securities				
10. Securities lending reinvested collateral assets				
11. Aggregate write-ins for invested assets				
12. Subtotals, cash and invested assets (Line 1 through Line 11)	76,529,828		76,529,828	71,086,737
13. Title plants less \$ charged off (for Title insurers only)				
14. Investment income due and accrued	270,444		270,444	374,084
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	6,430,965		6,430,965	6,708,998
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums)				
15.3 Accrued retrospective premiums				
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	84,966		84,966	64,029
16.2 Funds held by or deposited with reinsured companies				
16.3 Other amounts receivable under reinsurance contracts				
17. Amounts receivable relating to uninsured plans				
18.1 Current federal and foreign income tax recoverable and interest thereon	544,853		544,853	
18.2 Net deferred tax asset				
19. Guaranty funds receivable or on deposit				
20. Electronic data processing equipment and software	40,623		40,623	47,917
21. Furniture and equipment, including health care delivery assets (\$)				
22. Net adjustment in assets and liabilities due to foreign exchange rates				
23. Receivables from parent, subsidiaries and affiliates	1,100,000		1,100,000	1,199,654
24. Health care (\$) and other amounts receivable				
25. Aggregate write-ins for other than invested assets	11,194		11,194	21,659
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Line 12 to Line 25)	85,012,873		85,012,873	79,503,078
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts				
28. Total (Line 26 and Line 27)	85,012,873		85,012,873	79,503,078
DETAILS OF WRITE-INS				
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page				
1199. Totals (Line 1101 through Line 1103 plus Line 1198) (Line 11 above)				
2501. Salvage receivable	9,879		9,879	21,659
2502. Other assets	1,315		1,315	
2503.				
2598. Summary of remaining write-ins for Line 25 from overflow page				
2599. Totals (Line 2501 through Line 2503 plus Line 2598) (Line 25 above)	11,194		11,194	21,659

ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Antilles Insurance Company

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Losses (Part 2A, Line 35, Column 8)	4,510,304	4,525,960
2. Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6)		
3. Loss adjustment expenses (Part 2A, Line 35, Column 9)	1,535,455	1,587,078
4. Commissions payable, contingent commissions and other similar charges	3,283,485	2,886,973
5. Other expenses (excluding taxes, licenses and fees)	62,838	23
6. Taxes, licenses and fees (excluding federal and foreign income taxes)	1,844	7,740
7.1 Current federal and foreign income taxes (including \$ on realized capital gains (losses))	2,757,202	2,874,504
7.2 Net deferred tax liability	638,918	277,522
8. Borrowed money \$ and interest thereon \$		
9. Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of \$ 778,119 and including warranty reserves of \$)	16,396,271	16,350,813
10. Advance premium		
11. Dividends declared and unpaid:		
11.1 Stockholders	762,300	507,500
11.2 Policyholders		
12. Ceded reinsurance premiums payable (net of ceding commissions)	(990,044)	(900,703)
13. Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 19)		
14. Amounts withheld or retained by company for account of others	124,160	122,242
15. Remittances and items not allocated		
16. Provision for reinsurance (Schedule F, Part 7)		
17. Net adjustments in assets and liabilities due to foreign exchange rates		
18. Drafts outstanding		
19. Payable to parent, subsidiaries and affiliates		
20. Derivatives		
21. Payable for securities		
22. Payable for securities lending		
23. Liability for amounts held under uninsured plans		
24. Capital notes \$ and interest thereon \$		
25. Aggregate write-ins for liabilities	1,689,413	1,126,276
26. Total liabilities excluding protected cell liabilities (Line 1 through Line 25)	30,772,146	29,365,928
27. Protected cell liabilities		
28. Total liabilities (Line 26 and Line 27)	30,772,146	29,365,928
29. Aggregate write-ins for special surplus funds	27,669,008	25,191,266
30. Common capital stock	2,800,000	2,800,000
31. Preferred capital stock		
32. Aggregate write-ins for other than special surplus funds		
33. Surplus notes		
34. Gross paid in and contributed surplus	125,000	125,000
35. Unassigned funds (surplus)	23,646,719	22,020,884
36. Less treasury stock, at cost:		
36.1 shares common (value included in Line 30 \$)		
36.2 shares preferred (value included in Line 31 \$)		
37. Surplus as regards policyholders (Line 29 to Line 35, less Line 36) (Page 4, Line 39)	54,240,727	50,137,150
38. Totals (Page 2, Line 28, Column 3)	85,012,873	79,503,078
DETAILS OF WRITE-INS		
2501. Minimum retention for Catastrophe Trust Fund	1,689,413	1,126,276
2502.		
2503.		
2598. Summary of remaining write-ins for Line 25 from overflow page		
2599. Totals (Line 2501 through Line 2503 plus Line 2598) (Line 25 above)	1,689,413	1,126,276
2901. Statutory Catastrophe Trust Fund	27,669,008	25,191,266
2902.		
2903.		
2998. Summary of remaining write-ins for Line 29 from overflow page		
2999. Totals (Line 2901 through Line 2903 plus Line 2998) (Line 29 above)	27,669,008	25,191,266
3201.		
3202.		
3203.		
3298. Summary of remaining write-ins for Line 32 from overflow page		
3299. Totals (Line 3201 through Line 3203 plus Line 3298) (Line 32 above)		

STATEMENT OF INCOME

UNDERWRITING INCOME	1 Current Year	2 Prior Year
1. Premiums earned (Part 1, Line 35, Column 4)	23,078,159	22,842,776
DEDUCTIONS		
2. Losses incurred (Part 2, Line 35, Column 7)	1,953,827	2,055,709
3. Loss adjustment expenses incurred (Part 3, Line 25, Column 1)	1,739,698	2,416,182
4. Other underwriting expenses incurred (Part 3, Line 25, Column 2)	15,957,272	15,468,728
5. Aggregate write-ins for underwriting deductions		
6. Total underwriting deductions (Line 2 through Line 5)	19,650,797	19,940,619
7. Net income of protected cells		
8. Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7)	3,427,362	2,902,157
INVESTMENT INCOME		
9. Net investment income earned (Exhibit of Net Investment Income, Line 17)	2,990,544	2,826,164
10. Net realized capital gains (losses) less capital gains tax of \$	823,508	4,428,592
11. Net investment gain (loss) (Line 9 plus Line 10)	3,814,052	7,254,756
OTHER INCOME		
12. Net gain (loss) from agents' or premium balances charged off (amount recovered \$, amount charged off \$)		
13. Finance and service charges not included in premiums	6,496	122,646
14. Aggregate write-ins for miscellaneous income		
15. Total other income (Line 12 through Line 14)	6,496	122,646
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 8 plus Line 11 plus Line 15)	7,247,910	10,279,559
17. Dividends to policyholders		
18. Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17)	7,247,910	10,279,559
19. Federal and foreign income taxes incurred	340,840	3,940,741
20. Net income (Line 18 minus Line 19) (to Line 22)	6,907,070	6,338,818
CAPITAL AND SURPLUS ACCOUNT		
21. Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2)	50,137,150	47,618,667
22. Net income (from Line 20)	6,907,070	6,338,818
23. Net transfers (to) from Protected Cell accounts		
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$	1,167,570	(660,986)
25. Change in net unrealized foreign exchange capital gain (loss)		
26. Change in net deferred income tax	(361,396)	(2,884)
27. Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Column 3)		
28. Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1)		
29. Change in surplus notes		
30. Surplus (contributed to) withdrawn from protected cells		
31. Cumulative effect of changes in accounting principles		
32. Capital changes:		
32.1 Paid in		
32.2 Transferred from surplus (Stock Dividend)		
32.3 Transferred to surplus		
33. Surplus adjustments:		
33.1 Paid in		
33.2 Transferred to capital (Stock Dividend)		
33.3 Transferred from capital		
34. Net remittances from or (to) Home Office		
35. Dividends to stockholders	(3,046,530)	(2,030,189)
36. Change in treasury stock (Page 3, Line 36.1 and Line 36.2, Column 2 minus Column 1)		
37. Aggregate write-ins for gains and losses in surplus	(563,137)	(1,126,276)
38. Change in surplus as regards policyholders for the year (Line 22 through Line 37)	4,103,577	2,518,483
39. Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37)	54,240,727	50,137,150
DETAILS OF WRITE-INS		
0501.		
0502.		
0503.		
0598. Summary of remaining write-ins for Line 5 from overflow page		
0599. Totals (Line 0501 through Line 0503 plus Line 0598) (Line 5 above)		
1401.		
1402.		
1403.		
1498. Summary of remaining write-ins for Line 14 from overflow page		
1499. Totals (Line 1401 through Line 1403 plus Line 1498) (Line 14 above)		
3701. Surplus adjustment: Transferred to Statutory Catastrophe Trust Fund	(3,040,879)	(1,957,296)
3702. Statutory Catastrophe Trust Fund	2,477,742	831,020
3703.		
3798. Summary of remaining write-ins for Line 37 from overflow page		
3799. Totals (Line 3701 through Line 3703 plus Line 3798) (Line 37 above)	(563,137)	(1,126,276)

CASH FLOW

	1	2
	Current Year	Prior Year
Cash from Operations		
1. Premiums collected net of reinsurance	23,312,309	22,488,620
2. Net investment income	2,495,406	2,027,449
3. Miscellaneous income	6,496	122,646
4. Total (Line 1 through Line 3)	25,814,211	24,638,715
5. Benefit and loss related payments	3,781,741	5,088,461
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		
7. Commissions, expenses paid and aggregate write-ins for deductions	15,503,841	14,162,853
8. Dividends paid to policyholders		
9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses)	1,002,995	1,110,168
10. Total (Line 5 through Line 9)	20,288,577	20,361,482
11. Net cash from operations (Line 4 minus Line 10)	5,525,634	4,277,233
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds	18,389,423	20,594,028
12.2 Stocks	5,347,503	6,080,442
12.3 Mortgage loans	10,000	1,368,319
12.4 Real estate		
12.5 Other invested assets		
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments		
12.7 Miscellaneous proceeds	119,330	1,277,149
12.8 Total investment proceeds (Line 12.1 through Line 12.7)	23,866,256	29,319,938
13. Cost of investments acquired (long-term only):		
13.1 Bonds	21,983,463	25,474,538
13.2 Stocks	790,171	6,207,296
13.3 Mortgage loans		450,000
13.4 Real estate		
13.5 Other invested assets		
13.6 Miscellaneous applications		
13.7 Total investments acquired (Line 13.1 through Line 13.6)	22,773,634	32,131,834
14. Net increase (decrease) in contract loans and premium notes		
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	1,092,622	(2,811,896)
Cash from Financing and Miscellaneous Sources		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes		
16.2 Capital and paid in surplus, less treasury stock		
16.3 Borrowed funds		
16.4 Net deposits on deposit-type contracts and other insurance liabilities		
16.5 Dividends to stockholders	2,791,730	2,078,587
16.6 Other cash provided (applied)		
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	(2,791,730)	(2,078,587)
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18. Net change in cash, cash equivalents and short-term investments (Line 11 plus Line 15 plus Line 17)	3,826,526	(613,250)
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of period	3,913,551	4,526,801
19.2 End of year (Line 18 plus Line 19.1)	7,740,077	3,913,551

Note: Supplemental disclosures of cash flow information for non-cash transactions:

20.0001		
20.0002		
20.0003		
20.0004		
20.0005		
20.0006		
20.0007		
20.0008		
20.0009		
20.0010		

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1 - PREMIUMS EARNED

Line of Business	1 Net Premiums Written per Column 6, Part 1B	2 Unearned Premiums December 31 Prior Year- per Column 3, Last Year's Part 1	3 Unearned Premiums December 31 Current Year- per Column 5 Part 1A	4 Premiums Earned During Year (Columns 1 plus 2 minus 3)
1. Fire	785,352	597,952	587,852	795,452
2. Allied lines	7,566,720	5,119,522	5,341,052	7,345,190
3. Farmowners multiple peril				
4. Homeowners multiple peril	521,203	334,794	324,023	531,974
5. Commercial multiple peril	3,963,692	2,881,540	2,817,404	4,027,828
6. Mortgage guaranty				
8. Ocean marine	47,619	13,079	2,192	58,506
9. Inland marine	20,720	4,849	19,922	5,647
10. Financial guaranty				
11.1 Medical professional liability - occurrence				
11.2 Medical professional liability - claims-made				
12. Earthquake	8,995,893	6,305,605	6,434,726	8,866,772
13. Group accident and health				
14. Credit accident and health (group and individual)				
15. Other accident and health				
16. Workers' compensation				
17.1 Other liability - occurrence	44,044	36,847	21,129	59,762
17.2 Other liability - claims-made				
17.3 Excess Workers' Compensation				
18.1 Products liability - occurrence	58,313	31,189	30,527	58,975
18.2 Products liability - claims-made				
19.1, 19.2 Private passenger auto liability	10,247	5,810	4,555	11,502
19.3, 19.4 Commercial auto liability	322,939	180,344	181,130	322,153
21. Auto physical damage	583,290	719,075	526,309	776,056
22. Aircraft (all perils)				
23. Fidelity	2,448	2,541	1,513	3,476
24. Surety	199,801	117,054	103,325	213,530
26. Burglary and theft	1,336	612	612	1,336
27. Boiler and machinery				
28. Credit				
29. International				
30. Warranty				
31. Reinsurance - Nonproportional Assumed Property				
32. Reinsurance - Nonproportional Assumed Liability				
33. Reinsurance - Nonproportional Assumed Financial Lines				
34. Aggregate write-ins for other lines of business				
35. TOTALS	23,123,617	16,350,813	16,396,271	23,078,159
DETAILS OF WRITE-INS				
3401. Title				
3402.				
3403.				
3498. Summary of remaining write-ins for Line 34 from overflow page				
3499. Totals (Line 3401 through Line 3403 plus Line 3498) (Line 34 above)				

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1A-RECAPITULATION OF ALL PREMIUMS

Line of Business	1 Amount Unearned (Running One Year or Less from Date of Policy) (a)	2 Amount Unearned (Running More Than One Year from Date of Policy) (a)	3 Earned but Unbilled Premium	4 Reserve for Rate Credits and Retrospective Adjustments Based on Experience	5 Total Reserve for Unearned Premiums Columns 1 + 2 + 3 + 4
1. Fire	587,843	9			587,852
2. Allied lines	5,341,075	(23)			5,341,052
3. Farmowners multiple peril					
4. Homeowners multiple peril	323,974	49			324,023
5. Commercial multiple peril	2,817,087	317			2,817,404
6. Mortgage guaranty					
8. Ocean marine	2,192				2,192
9. Inland marine	19,922				19,922
10. Financial guaranty					
11.1 Medical professional liability - occurrence					
11.2 Medical professional liability - claims-made					
12. Earthquake	6,434,638	88			6,434,726
13. Group accident and health					
14. Credit accident and health (group and individual)					
15. Other accident and health					
16. Workers' compensation					
17.1 Other liability - occurrence	21,129				21,129
17.2 Other liability - claims-made					
17.3 Excess Workers' Compensation					
18.1 Products liability - occurrence	30,527				30,527
18.2 Products liability - claims-made					
19.1, 19.2 Private passenger auto liability	4,555				4,555
19.3, 19.4 Commercial auto liability	181,130				181,130
21. Auto physical damage	334,994	191,315			526,309
22. Aircraft (all perils)					
23. Fidelity	1,513				1,513
24. Surety	96,441	6,884			103,325
26. Burglary and theft	612				612
27. Boiler and machinery					
28. Credit					
29. International					
30. Warranty					
31. Reinsurance - Nonproportional Assumed Property					
32. Reinsurance - Nonproportional Assumed Liability					
33. Reinsurance - Nonproportional Assumed Financial Lines					
34. Aggregate write-ins for other lines of business					
35. TOTALS	16,197,632	198,639			16,396,271
36. Accrued retrospective premiums based on experience					
37. Earned but unbilled premiums					
38. Balance (Sum of Line 35 through Line 37)					16,396,271
DETAILS OF WRITE-INS					
3401.					
3402.					
3403.					
3498. Summary of remaining write-ins for Line 34 from overflow page					
3499. Totals (Line 3401 through Line 3403 plus Line 3498) (Line 34 above)					

(a) State here basis of computation used in each case.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1B-PREMIUMS WRITTEN

Line of Business	1 Direct Business (a)	Reinsurance Assumed		Reinsurance Ceded		6 Net Premiums Written Columns 1 + 2 + 3 - 4 - 5
		2 From Affiliates	3 From Non-Affiliates	4 To Affiliates	5 To Non-Affiliates	
1. Fire	1,201,017				415,665	785,352
2. Allied lines	10,732,593				3,165,873	7,566,720
3. Farmowners multiple peril						
4. Homeowners multiple peril	674,228				153,025	521,203
5. Commercial multiple peril	5,988,855				2,025,163	3,963,692
6. Mortgage guaranty						
8. Ocean marine	220,849				173,230	47,619
9. Inland marine	34,786				14,066	20,720
10. Financial guaranty						
11.1 Medical professional liability - occurrence						
11.2 Medical professional liability - claims-made						
12. Earthquake	12,738,901				3,743,008	8,995,893
13. Group accident and health						
14. Credit accident and health (group and individual)						
15. Other accident and health						
16. Workers' compensation						
17.1 Other liability - occurrence	216,853				172,809	44,044
17.2 Other liability - claims-made						
17.3 Excess Workers' Compensation						
18.1 Products liability - occurrence	74,963				16,650	58,313
18.2 Products liability - claims-made						
19.1, 19.2 Private passenger auto liability	11,179				932	10,247
19.3, 19.4 Commercial auto liability	681,043				358,104	322,939
21. Auto physical damage	600,846				17,556	583,290
22. Aircraft (all perils)						
23. Fidelity	4,080				1,632	2,448
24. Surety	303,152				103,351	199,801
26. Burglary and theft	1,336					1,336
27. Boiler and machinery	2,232				2,232	
28. Credit						
29. International						
30. Warranty						
31. Reinsurance - Nonproportional Assumed Property	X X X					
32. Reinsurance - Nonproportional Assumed Liability	X X X					
33. Reinsurance - Nonproportional Assumed Financial Lines	X X X					
34. Aggregate write-ins for other lines of business						
35. TOTALS	33,486,913				10,363,296	23,123,617
DETAILS OF WRITE-INS						
3401.						
3402.						
3403.						
3498. Summary of remaining write-ins for Line 34 from overflow page						
3499. Totals (Line 3401 through Line 3403 plus Line 3498) (Line 34 above)						

(a) Does the company's direct premiums written include premiums recorded on an installment basis? Yes () No (X)

If yes: 1. The amount of such installment premiums \$
 2. Amount at which such installment premiums would have been reported had they been recorded on an annualized basis \$

ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Antilles Insurance Company

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - LOSSES PAID AND INCURRED

Line of Business	Losses Paid Less Salvage				5	6	7	8
	1 Direct Business	2 Reinsurance Assumed	3 Reinsurance Recovered	4 Net Payments (Columns 1 plus 2 minus 3)	Net Losses Unpaid Current Year (Part 2A, Column 8)	Net Losses Unpaid Prior Year	Losses Incurred Current Year (Columns 4 plus 5 minus 6)	Percentage of Losses Incurred (Column 7, Part 2) to Premiums Earned (Column 4, Part 1)
1. Fire	398,141			398,141	265,416	222,261	441,296	55.5
2. Allied lines	15,382			15,382	172,500	193,123	(5,241)	(0.1)
3. Farmowners multiple peril					(22,700)		(22,700)	
4. Homeowners multiple peril	86,501			86,501	242,576	228,665	100,412	18.9
5. Commercial multiple peril	1,213,710		515,811	697,899	2,247,978	2,187,627	758,250	18.8
6. Mortgage guaranty								
8. Ocean marine	86,996		80,907	6,089	8,836	13,800	1,125	1.9
9. Inland marine	11,736			11,736			11,736	207.8
10. Financial guaranty								
11.1 Medical professional liability - occurrence								
11.2 Medical professional liability - claims-made								
12. Earthquake	2,847			2,847	3,100		5,947	0.1
13. Group accident and health								
14. Credit accident and health (group and individual)								
15. Other accident and health								
16. Workers' compensation								
17.1 Other liability - occurrence	1,200			1,200	15,000		16,200	27.1
17.2 Other liability - claims-made								
17.3 Excess Workers' Compensation								
18.1 Products liability - occurrence	125			125	21,275	44,000	(22,600)	(38.3)
18.2 Products liability - claims-made								
19.1, 19.2 Private passenger auto liability	2,604			2,604	87,300	87,300	2,604	22.6
19.3, 19.4 Commercial auto liability	1,108,216		675,080	433,136	519,404	737,387	215,153	66.8
21. Auto physical damage	210,183			210,183	546,970	589,353	167,800	21.6
22. Aircraft (all perils)								
23. Fidelity					5,800	5,800		
24. Surety	103,640			103,640	395,849	215,644	283,845	132.9
26. Burglary and theft					1,000	1,000		
27. Boiler and machinery								
28. Credit								
29. International								
30. Warranty								
31. Reinsurance- Nonproportional Assumed Property	X X X							
32. Reinsurance- Nonproportional Assumed Liability	X X X							
33. Reinsurance- Nonproportional Assumed Financial Lines	X X X							
34. Aggregate write-ins for other lines of business								
35. TOTALS	3,241,281		1,271,798	1,969,483	4,510,304	4,525,960	1,953,827	8.5
DETAILS OF WRITE-INS								
3401. Title								
3402.								
3403.								
3498. Summary of remaining write-ins for Line 34 from overflow page								
3499. Totals (Line 3401 through Line 3403 plus Line 3498) (Line 34 above)								

ANNUAL STATEMENT FOR THE YEAR 2010 OF THE Antilles Insurance Company

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

Line of Business	Reported Losses				Incurred But Not Reported			8 Net Losses Unpaid (Columns 4 plus 5 plus 6 minus 7)	9 Net Unpaid Loss Adjustment Expenses
	1 Direct	2 Reinsurance Assumed	3 Deduct Reinsurance Recoverable from Authorized and Unauthorized Companies	4 Net Losses Excluding Incurred But Not Reported (Columns 1 plus 2 minus 3)	5 Direct	6 Reinsurance Assumed	7 Reinsurance Ceded		
1. Fire	160,371			160,371	105,045			265,416	44,331
2. Allied lines	5,477			5,477	192,623		25,600	172,500	11,878
3. Farmowners multiple peril							22,700	(22,700)	
4. Homeowners multiple peril	107,576		38,000	69,576	173,000			242,576	70,511
5. Commercial multiple peril	2,145,645		430,342	1,715,303	555,180		22,505	2,247,978	756,282
6. Mortgage guaranty									
8. Ocean marine	1,427		6,391	(4,964)	56,238		42,438	8,836	6,372
9. Inland marine									1,453
10. Financial guaranty									
11.1 Medical professional liability - occurrence									
11.2 Medical professional liability - claims-made									
12. Earthquake	3,100			3,100				3,100	1,948
13. Group accident and health								(a)	
14. Credit accident and health (group and individual)								(a)	
15. Other accident and health									
16. Workers' compensation									
17.1 Other liability - occurrence	15,000			15,000				15,000	
17.2 Other liability - claims-made									
17.3 Excess Workers' Compensation									
18.1 Products liability - occurrence	21,275			21,275				21,275	
18.2 Products liability - claims-made									
19.1, 19.2 Private passenger auto liability					109,200		21,900	87,300	375,171
19.3, 19.4 Commercial auto liability	220,513		9	220,504	298,900			519,404	9,466
21. Auto physical damage	128,570			128,570	418,400			546,970	225,997
22. Aircraft (all perils)									
23. Fidelity					5,800			5,800	
24. Surety	384,005		12,656	371,349	74,800		50,300	395,849	31,978
26. Burglary and theft					1,000			1,000	
27. Boiler and machinery					4,300		4,300		68
28. Credit									
29. International									
30. Warranty									
31. Reinsurance- Nonproportional Assumed Property	X X X				X X X				
32. Reinsurance- Nonproportional Assumed Liability	X X X				X X X				
33. Reinsurance- Nonproportional Assumed Financial Lines	X X X				X X X				
34. Aggregate write-ins for other lines of business									
35. TOTALS	3,192,959		487,398	2,705,561	1,994,486		189,743	4,510,304	1,535,455
DETAILS OF WRITE-INS									
3401.									
3402.									
3403.									
3498. Summary of remaining write-ins for Line 34 from overflow page									
3499. Totals (Line 3401 through Line 3403 plus Line 3498) (Line 34 above)									

(a) Including \$ for present value of life indemnity claims.

UNDERWRITING AND INVESTMENT EXHIBIT**PART 3 - EXPENSES**

	1	2	3	4
	Loss Adjustment Expenses	Other Underwriting Expenses	Investment Expenses	Total
1. Claim adjustment services:				
1.1 Direct	510,474			510,474
1.2 Reinsurance assumed				
1.3 Reinsurance ceded	116,231			116,231
1.4 Net claim adjustment services (Line 1.1 plus Line 1.2 minus Line 1.3)	394,243			394,243
2. Commission and brokerage:				
2.1 Direct excluding contingent		7,857,349		7,857,349
2.2 Reinsurance assumed excluding contingent				
2.3 Reinsurance ceded excluding contingent				
2.4 Contingent - direct		3,434,843		3,434,843
2.5 Contingent - reinsurance assumed				
2.6 Contingent - reinsurance ceded		423,363		423,363
2.7 Policy and membership fees				
2.8 Net commission and brokerage (Line 2.1 plus Line 2.2 minus Line 2.3 plus Line 2.4 plus Line 2.5 minus Line 2.6 plus Line 2.7)		10,868,829		10,868,829
3. Allowances to manager and agents	8,523	5,290		13,813
4. Advertising		153,568		153,568
5. Boards, bureaus and associations		8,591		8,591
6. Surveys and underwriting reports		106,604		106,604
7. Audit of assureds' records				
8. Salary and related items:				
8.1 Salaries				
8.2 Payroll taxes				
9. Employee relations and welfare	180	1,659		1,839
10. Insurance				
11. Directors' fees		4,636		4,636
12. Travel and travel items		1,043		1,043
13. Rent and rent items		457,313		457,313
14. Equipment	8,342	144,474	667	153,483
15. Cost or depreciation of EDP equipment and software				
16. Printing and stationery	97	24,930		25,027
17. Postage, telephone and telegraph, exchange and express		36,945	112,276	149,221
18. Legal and auditing		98,338		98,338
19. Totals (Line 3 through Line 18)	17,142	1,043,391	112,943	1,173,476
20. Taxes, licenses and fees:				
20.1 State and local insurance taxes deducting guaranty association credits of \$				
20.2 Insurance department licenses and fees		63,675		63,675
20.3 Gross guaranty association assessments		71,296		71,296
20.4 All other (excluding federal and foreign income and real estate)				
20.5 Total taxes, licenses and fees (Line 20.1 plus Line 20.2 plus Line 20.3 plus Line 20.4)		134,971		134,971
21. Real estate expenses				
22. Real estate taxes				
23. Reimbursements by uninsured plans				
24. Aggregate write-ins for miscellaneous expenses	1,328,313	3,910,081	106,265	5,344,659
25. Total expenses incurred	1,739,698	15,957,272	219,208	(a) 17,916,178
26. Less unpaid expenses - current year	1,535,455	3,348,167		4,883,622
27. Add unpaid expenses - prior year	1,587,078	2,894,736		4,481,814
28. Amounts receivable relating to uninsured plans, prior year				
29. Amounts receivable relating to uninsured plans, current year				
30. TOTAL EXPENSES PAID (Line 25 minus Line 26 plus Line 27 minus Line 28 plus Line 29)	1,791,321	15,503,841	219,208	17,514,370
DETAILS OF WRITE-INS				
2401. Management Fees	1,328,313	3,878,672	106,265	5,313,250
2402. Donations		31,409		31,409
2403.				
2498. Summary of remaining write-ins for Line 24 from overflow page				
2499. Totals (Line 2401 through Line 2403 plus Line 2498) (Line 24 above)	1,328,313	3,910,081	106,265	5,344,659

(a) Includes management fees of \$ to affiliates and \$ to non-affiliates.

EXHIBIT OF NET INVESTMENT INCOME

	1	2
	Collected During Year	Earned During Year
1. U.S. Government bonds	(a)	
1.1 Bonds exempt from U.S. tax	(a) 2,918,234	2,819,591
1.2 Other bonds (unaffiliated)	(a)	
1.3 Bonds of affiliates	(a)	
2.1 Preferred stocks (unaffiliated)	(b)	
2.11 Preferred stocks of affiliates	(b)	
2.2 Common stocks (unaffiliated)		
2.21 Common stocks of affiliates	100,547	100,547
3. Mortgage loans	(c)	
4. Real estate	(d) 256,561	256,561
5. Contract loans	(d)	
6. Cash, cash equivalents and short-term investments	(e)	
7. Derivative instruments	(f) 38,049	33,052
8. Other invested assets	(f)	
9. Aggregate write-ins for investment income		
10. Total gross investment income	3,313,391	3,209,751
11. Investment expenses		(g)
12. Investment taxes, licenses and fees, excluding federal income taxes		(g) 219,208
13. Interest expense		(h)
14. Depreciation on real estate and other invested assets		(i)
15. Aggregate write-ins for deductions from investment income		
16. Totals deductions (Line 11 through Line 15)		219,208
17. Net investment income (Line 10 minus Line 16)		2,990,543

DETAILS OF WRITE-INS

0901.		
0902.		
0903.		
0998. Summary of remaining write-ins for Line 9 from overflow page		
0999. Totals (Line 0901 through Line 0903 plus Line 0998) (Line 9 above)		
1501.		
1502.		
1503.		
1598. Summary of remaining write-ins for Line 15 from overflow page		
1599. Totals (Line 1501 through Line 1503 plus Line 1598) (Line 15 above)		

(a) Includes \$ 598,255 accrual of discount less \$ amortization of premium and less \$ 34,685 paid for accrued interest on purchases.
 (b) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued dividends on purchases.
 (c) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.
 (d) Includes \$ for company's occupancy of its own buildings; and excludes \$ interest on encumbrances.
 (e) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.

(f) Includes \$ accrual of discount less \$ amortization of premium.
 (g) Includes \$ investment expenses and \$ investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.
 (h) Includes \$ interest on surplus notes and \$ interest on capital notes.
 (i) Includes \$ depreciation on real estate and \$ depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

	1	2	3	4	5
	Realized Gain (Loss) on Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Cols. 1 + 2)	Change in Unrealized Capital Gain (Loss)	Change in Unrealized Foreign Exchange Capital Gain (Loss)
1. U.S. Government bonds					
1.1 Bonds exempt from U.S. tax	(1,563)		(1,563)		
1.2 Other bonds (unaffiliated)					
1.3 Bonds of affiliates					
2.1 Preferred stocks (unaffiliated)					
2.11 Preferred stocks of affiliates					
2.2 Common stocks (unaffiliated)	825,071		825,071	1,167,570	
2.21 Common stocks of affiliates					
3. Mortgage loans					
4. Real estate					
5. Contract loans					
6. Cash, cash equivalents and short-term investments					
7. Derivative instruments					
8. Other invested assets					
9. Aggregate write-ins for capital gains (losses)					
10. Total capital gains (losses)	823,508		823,508	1,167,570	
DETAILS OF WRITE-INS					
0901.					
0902.					
0903.					
0998. Summary of remaining write-ins for Line 9 from overflow page					
0999. Totals (Line 0901 through Line 0903 plus Line 0998) (Line 9 above)					

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Exhibit 9, Analysis of Nonadmitted Assets and Related Items

NONE

NOTES TO FINANCIAL STATEMENTS

1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES:

A. Accounting Practices

The financial statements of Antilles Insurance Company have been prepared in conformity with accounting practices prescribed or permitted by the National Association of Insurance Commissioners (NAIC) and the Insurance Commissioner of Puerto Rico.

B. Use of Estimates in the Preparation of the Financial Statements

The preparation of financial statements in conformity with Statutory Accounting Principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. Actual results could differ from those estimates.

C. Accounting Policy

Premiums are earned over the terms of the related insurance policies. Unearned premium reserves are established to cover the unexpired portion of premiums written. Such reserves are computed by pro rata methods for direct business written.

Expenses incurred in connection with acquiring new insurance business, including such acquisition costs as sales commissions, are charged to operations as incurred. Expenses incurred are reduced for ceding allowances received or receivable.

In addition, the company uses the following accounting policies:

1. Short-term investments are stated at cost.
2. Bonds are stated at cost and premiums/discounts are amortized using the effective yield (Scientific) method.
3. Common stocks are valued at market value.
4. Preferred stocks are carried at cost, lower of cost or amortized cost, or fair value depending on the assigned credit rating and whether the preferred stock has mandatory sinking fund provisions.
5. Mortgage loans are valued at unpaid principal balance.
6. Loan-backed securities are stated at amortized cost or the lower of amortized cost or fair market value.
7. The Company has no investment's in subsidiaries, controlled or affiliated companies.
8. The Company has no ownership interests in joint ventures, partnerships or limited liability companies.
9. The Company has no derivatives.
10. The Company does not anticipate investment income as a factor in the premium deficiency calculation.
11. Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates and loss reports and an amount, based on past experience, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and while management believes the amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liability are continually reviewed and any adjustments are reflected in the period determined.

2. ACCOUNTING CHANGES AND CORRECTIONS OF ERRORS

The Company prepares its statutory financial statements in conformity with accounting practices prescribed or permitted by the Commonwealth of Puerto Rico. Effective January 1, 2001, the Commonwealth of Puerto Rico required that insurance companies domiciled in the Commonwealth of Puerto Rico prepare their statutory basis financial statements in accordance with the NAIC Accounting Practices and Procedures manual subject to any deviations prescribed or permitted by the Commonwealth of Puerto Rico Insurance Commissioner.

Accounting changes adopted to conform to the provisions of the NAIC Accounting Practices and Procedures manual are reported as changes in accounting principles. The cumulative effect of changes in accounting principles is reported as an adjustment to unassigned funds (surplus) in the period of the change in accounting principle. The cumulative effect is the difference between the amount of capital and surplus at the beginning of the year and the amount of capital and surplus that would have been reported at that date if the new accounting principles had been applied retroactively for all prior periods. The Company did not make any changes in accounting principles that would have increased or decreased unassigned funds (suplus) for the year ended December 31, 2010.

3. BUSINESS COMBINATIONS AND GOODWILL

-NONE-

4. DISCONTINUED OPERATIONS

-NONE-

5. INVESTMENTS

A. Mortgage Loans

1. The lending rate for mortgage loans during 2010 was six (6) percent.
2. During 2010 the Company did not reduce interest rates on outstanding mortgages.
3. The maximum percentage of any one loan to the value of security at the time of the loan, exclusive of insured or guaranteed or purchase money mortgages was 66.6%.
4. As of year end, the Company held no mortgages with interest more than 180 days past due.
5. There are no taxes, assessments or any amounts advanced not included in the mortgage loan total.
6. Current year impaired loans with a related allowance for credit losses.

-None-

NOTES TO FINANCIAL STATEMENTS

7. Recorded investment for which there is no related allowance for credit loss.
-None-
8. Average recorded investment in the impaired loans.
-None-
9. Interest income recognized during the period the loans were impaired.
-None-
10. Amount of interest income recognized on a cash basis during the period the loans were impaired.
-None-
11. The Company has no credit loss.
12. The Company has no impaired loans, cash receipts are deposited daily and reconciled with invoices.

B. Debt Restructuring

- NONE-

C. Reverse Mortgages

-NONE-

D. Loan-Backed Securities

-NONE-

E. Repurchase Agreements and/or Securities Lending

-NONE-

F. Real Estate

-NONE-

6. JOINT VENTURES, PARTNERSHIPS AND LIMITED LIABILITY COMPANIES

-NONE-

7. INVESTMENT INCOME

1. There was no amount excluded from investment income.

8. DERIVATIVE INSTRUMENTS

- NONE -

9. INCOME TAXES

The Company is not subject to Federal Income Tax. The income tax shown is related to the Puerto Rico Income Tax.

10. INFORMATION CONCERNING PARENT, SUBSIDIARIES AND AFFILIATES

The Company is 92.88% owned by Anglo Puerto Rican Insurance Corporation, a general agent domiciled in Puerto Rico.

The Company is managed by and obtains substantially all its premiums from its principal general agent, Anglo Puerto Rican Insurance Corporation.

Under the provisions of a management contract between the Company and the General Agent, the Company is required to pay certain fees intended to reimburse the General Agent for operating expenses incurred on the Company's behalf. The total fees under such contract for the year ended December 31, 2010 and 2009 aggregated \$5,313,250 and \$5,299,346 respectively. These amounts include \$1,535,455 in 2010 and \$1,854,77 in 2009 charged to loss adjustment expenses incurred.

11. DEBT

- NONE -

12. RETIREMENT PLANS, DEFERRED COMPENSATION, POSTEMPLOYMENT BENEFITS AND COMPENSATED ABSENCES AND OTHER POSTRETIREMENT BENEFIT PLANS

Not applicable, the Company has no employees.

13. CAPITAL AND SURPLUS, DIVIDEND RESTRICTIONS AND QUASI-REORGANIZATIONS.

1. The Company has 500,000 shares authorized, 280,000 shares issued and outstanding. All shares are Class A shares
2. The Company has no preferred stock issued.
3. Dividends to shareholders are limited by the Insurance Code of Puerto Rico.
4. A dividend of \$10.89 per share for the year 2010 was declared by the Board of Directors on March 19, 2010. This dividend is paid on quarterly basis on the following dates April 15, July 15, October 15 and January 15.
5. Within the limitations of (3) above, there are no restrictions placed on the portion of Company profits that may be paid as ordinary dividends to stockholders.

NOTES TO FINANCIAL STATEMENTS

6. To comply with Law 73 of the Insurance Code of Puerto Rico, as amended, a restriction is applied to our unassigned funds to cover the payment of losses in the event of a catastrophic event.
7. The total amount of advances to surplus not repaid is \$0.00.
8. The amounts of stock held by the Company, including stock of affiliated companies, for special purposes is:
 - a. For conversion of preferred stock: 0 shares
 - b. For employee stock options: 0 shares
 - c. For stock purchase warrants: 0 shares
9. Changes in balances of special surplus funds from the prior year are due to :
Increase in Statutory Catastrophe Trust Fund.
10. The portion of unassigned funds (surplus) represented or reduced by each item below is as follows:
 - a. unrealized gains and (losses): \$2,037,903
 - b. nonadmitted asset values: \$0
 - c. provision for reinsurance: \$0
11. The Company issued the following surplus debenture or similar obligations.
-NONE-
12. The impact of any restatement due to prior quasi-reorganizations is as follows:
-NONE-
13. The effective date(s) of all quasi-reorganizations in the prior 10 years.
-NONE-

14. CONTINGENCIES

-NONE-

15. LEASES

The Company has a ten year renewable lease with Ochoa Realty Inc. to rent the penthouse floor of Ochoa Bldg. Rental expense for year 2010 amounted to \$225,000 plus expenses of \$145,000.

16 INFORMATION ABOUT FINANCIAL INSTRUMENTS WITH OFF-BALANCE SHEET RISK AND FINANCIAL INSTRUMENTS WITH CONCENTRATIONS OF CREDIT RISK

- NONE -

17 SALE, TRANSFER AND SERVICING OF FINANCIAL ASSETS AND EXTINGUISHMENTS OF LIABILITIES**A. TRANSFER OF RECEIVABLES REPORTED AS SALES**

- NONE -

B. TRANSFER AND SERVICING OF FINANCIAL ASSETS

-NONE-

C. WASH SALES

-NONE-

18. GAIN OR LOSS TO THE REPORTING ENTITY FROM UNINSURED PLANS AND THE UNINSURED PORTION OF PARTIALLY INSURED PLANS

- NONE -

19 DIRECT PREMIUM WRITTEN/PRODUCED BY MANAGING GENERAL AGENTS/THIRD PARTY ADMINISTRATORS

1. ANGLO PUERTO RICAN INSURANCE CORP., P.O. BOX 9023752, OLD SAN JUAN, P.R. 00902-3752
2. 66-018-2569
3. EXCLUSIVE CONTRACT HOLD: NO
4. TYPE OF BUSINESS: CASUALTY, PROPERTY, MARINE AND SURETY
5. TYPE OF AUTHORITY GRANTED

U - Underwriting

C - Claims Payment

CA - Claims Adjustment

R - Reinsurance Ceding

B - Binding Authority

P - Premium Collection

6. TOTAL PREMIUMS WRITTEN 2010 \$11,465,398

20 FAIR VALUE MEASUREMENT

Cash, Short-Term Investments, Net Agents' Balances, Reinsurance Recoverable and Accrued Interest Receivable -- The carrying amounts for these instruments approximate their fair values given their short maturity period.

Bonds and Notes, Common Stock and Mutual Funds -- The fair value of a security is determined in accordance with the NAIC Purpose and Procedures of the Securities Valuation Office, and the designation assigned in the NAIC Valuation of Securities product prepared by the NAIC Securities Valuation Office ("NAIC VALUES"). If NAIC Values are not available, fair value is determined based on quoted-market prices as provided by independent brokers. If quoted market prices are not available, fair value is determined based on quoted prices of similar instruments.

NOTES TO FINANCIAL STATEMENTS

21 OTHER ITEMS

-NONE-

22. EVENTS SUBSEQUENT

There were no events subsequent to December 31, 2010 which may have a material effect on the financial condition of the Company.

23. REINSURANCE

- A. Unsecured Reinsurance Recoverable
NONE
- B. Reinsurance Recoverable in Dispute
NONE
- C. Reinsurance Assumed and Ceded
NONE
- D. Uncollectible Reinsurance
NONE

24. RETROSPECTIVELY RATED CONTRACTS & CONTRACTS SUBJECT TO REDETERMINATION

- NONE -

25. CHANGE IN INCURRED LOSSES AND LOSS ADJUSTMENT EXPENSES

Reserves for incurred losses and loss adjustment expenses attributable to insured events of prior years is a decrease of \$1,290,000 in year 2010 as a result of reestimation of unpaid losses and loss adjustment expenses for all lines of insurance. This decrease is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased as additional information becomes known regarding individual claims. No additional premiums or return premiums have been accrued as a result of the prior-year effects.

26. INTERCOMPANY POOLING ARRANGEMENTS

-NONE-

27. STRUCTURED SETTLEMENTS

-NONE-

28. HEALTH CARE RECEIVABLES

-NONE-

29. PARTICIPATING POLICIES

-NONE-

30. PREMIUM DEFICIENCY RESERVES

As of December 31, 2010 the Company had no liabilities related to premium deficiency reserves.

31. HIGH DEDUCTIBLES

-NONE-

32. DISCOUNTING OF LIABILITIES FOR UNPAID LOSSES OR UNPAID LOSS ADJUSTMENT EXPENSES

The Company does not discount liabilities for unpaid losses or unpaid loss adjustment expenses.

33. ASBESTOS/ENVIRONMENTAL RESERVES

-NONE-

34. SUBSCRIBER SAVINGS ACCOUNTS

-NONE-

35. MULTIPLE PERIL CROP INSURANCE

-NONE-

36. FIANCIAL GUARANTY INSURANCE

-NONE-

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES

GENERAL

- 1.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? Yes () No (X)
- 1.2 If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent, or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations? Yes () No () N/A (X)
- 1.3 State Regulating?
- 2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? Yes () No (X)
- 2.2 If yes, date of change:
- 3.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2007
- 3.2 State the as of date of the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. 04/13/2009
- 3.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). 08/18/2010
- 3.4 By what department or departments?
- 3.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? Yes (X) No () N/A ()
- 3.6 Have all of the recommendations within the latest financial examination report been complied with? Yes (X) No () N/A ()
- 4.1 During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
 - 4.11 sales of new business? Yes () No (X)
 - 4.12 renewals? Yes () No (X)
- 4.2 During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
 - 4.21 sales of new business? Yes () No (X)
 - 4.22 renewals? Yes () No (X)
- 5.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes () No (X)
- 5.2 If yes, provide name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1 Name of Entity	2 NAIC Company Code	3 State of Domicile
.....
.....
.....

- 6.1 Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? Yes () No (X)
- 6.2 If yes, give full information:
- 7.1 Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? Yes () No (X)
- 7.2 If yes,
 - 7.21 State the percentage of foreign control;%
 - 7.22 State the nationality(s) of the foreign person(s) or entity(s); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(s) (e.g. individual, corporation, government, manager or attorney-in-fact).

1 Nationality	2 Type of Entity
.....
.....
.....

GENERAL INTERROGATORIES

8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? Yes () No (X)

8.2 If response to 8.1 is yes, please identify the name of the bank holding company.

8.3 Is the company affiliated with one or more banks, thrifts or securities firms? Yes () No (X)

8.4 If response to 8.3 is yes, please provide the names and location (city and state of the main office) of any affiliates regulated by a federal financial regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Office of Thrift Supervision (OTS), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 OTS	6 FDIC	7 SEC
.....
.....

9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?
 Deloitte & Touche LLP 350 Torre Chardon Avenue Suite 700, San Juan, PR 00918-2140

10.1 Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation? Yes () No (X)

10.2 If the response to 10.1 is yes, provide information related to this exemption:

10.3 Has the insurer been granted any exemptions to the audit committee requirements as allowed in Section 14H of the Annual Financial Model Regulation, or substantially similar state law or regulation? Yes () No (X)

10.4 If the response to 10.3 is yes, provide information related to this exemption:

10.5 Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Model Regulation as allowed for in Section 17A of the Model Regulation, or substantially similar state law or regulation? Yes () No (X)

10.6 If the response to 10.5 is yes, provide information related to this exemption:

10.7 Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws? Yes () No (X)

10.8 If the response to 10.7 is no, please explain

11. What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?
 Deloitte Consulting LLP, 25 Broadway, New York, NY 10004-1010

12.1 Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly? Yes () No (X)

- 12.11 Name of real estate holding company

- 12.12 Number of parcels involved

- 12.13 Total book/adjusted carrying value \$

12.2 If yes, provide explanation

13. FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:

13.1 What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?

13.2 Does this statement contain all business transacted for the reporting entity through its United States branch on risks wherever located? Yes () No ()

13.3 Have there been any changes made to any of the trust indentures during the year? Yes () No ()

13.4 If answer to (13.3) is yes, has the domiciliary or entry state approved the changes? Yes () No () N/A (X)

14.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? Yes (X) No ()

- (a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
- (b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
- (c) Compliance with applicable governmental laws, rules and regulations;
- (d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
- (e) Accountability for adherence to the code.

14.11 If the response to 14.1 is No, please explain:

14.2 Has the code of ethics for senior managers been amended? Yes () No (X)

14.21 If the response to 14.2 is Yes, provide information related to amendment(s).

14.3 Have any provisions of the code of ethics been waived for any of the specified officers? Yes () No (X)

14.31 If the response to 14.3 is Yes, provide the nature of any waiver(s).

GENERAL INTERROGATORIES

BOARD OF DIRECTORS

- 15. Is the purchase or sale of all investments of the reporting entity passed upon either by the Board of Directors or a subordinate committee thereof? Yes (X) No ()
- 16. Does the reporting entity keep a complete permanent record of the proceedings of its Board of Directors and all subordinate committees thereof? Yes (X) No ()
- 17. Has the reporting entity an established procedure for disclosure to its board of directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees, or responsible employees that is in conflict or is likely to conflict with the official duties of such person? Yes (X) No ()

FINANCIAL

- 18. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)? Yes () No (X)
- 19.1 Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):

	19.11 To directors or other officers	\$
	19.12 To stockholders not officers	\$
	19.13 Trustees, supreme or grand (Fraternal only)	\$
- 19.2 Total amount of loans outstanding at end of year (inclusive of Separate Accounts, exclusive of policy loans):

	19.21 To directors or other officers	\$ 1,024,780
	19.22 To stockholders not officers	\$
	19.23 Trustees, supreme or grand (Fraternal only)	\$
- 20.1 Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement? Yes () No (X)
- 20.2 If yes, state the amount thereof at December 31 of the current year:

	20.21 Rented from others	\$
	20.22 Borrowed from others	\$
	20.23 Leased from others	\$
	20.24 Other	\$
- 21.1 Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments? Yes () No (X)
- 21.2 If answer is yes:

	21.21 Amount paid as losses or risk adjustment	\$
	21.22 Amount paid as expenses	\$
	21.23 Other amounts paid	\$
- 22.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes (X) No ()
- 22.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$ 1,100,000

INVESTMENT

- 23.1 Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date? (other than securities lending programs addressed in 22.3) Yes () No (X)
- 23.2 If no, give full and complete information relating thereto:
 Securities in US Treasury Bonds and Common Stock are in custody of our investment brokers

- 23.3 For the security lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 16 where this information is also provided)

- 23.4 Does the Company's security lending program meet the requirements for a conforming program as outlined in Risk-Based Capital Instructions? Yes () No () N/A (X)
- 23.5 If answer to 23.4 is YES, report amount of collateral for conforming programs. \$
- 23.6 If answer to 23.4 is NO, report amount of collateral for other programs. \$
- 23.7 Does your security lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? Yes () No () N/A (X)
- 23.8 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? Yes () No () N/A (X)
- 23.9 Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities Lending Agreement (MSLA) to conduct securities lending? Yes () No () N/A (X)

GENERAL INTERROGATORIES

INVESTMENT

24.1 Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity, or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 20.1 and 23.3) Yes () No (X)

24.2 If yes, state the amount thereof at December 31 of the current year:

	24.21 Subject to repurchase agreements	\$
	24.22 Subject to reverse repurchase agreements	\$
	24.23 Subject to dollar repurchase agreements	\$
	24.24 Subject to reverse dollar repurchase agreements	\$
	24.25 Pledged as collateral	\$
	24.26 Placed under option agreements	\$
	24.27 Letter stock or securities restricted as to sale	\$
	24.28 On deposit with state or other regulatory body	\$
	24.29 Other	\$

24.3 For category (24.27) provide the following:

1 Nature of Restriction	2 Description	3 Amount
.....
.....
.....

25.1 Does the reporting entity have any hedging transactions reported on Schedule DB? Yes () No (X)

25.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? If no, attach a description with this statement. Yes () No () N/A (X)

26.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity? Yes () No (X)

26.2 If yes, state the amount thereof at December 31 of the current year. \$

27. Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds, and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III General Examination Considerations, F - Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook? Yes (X) No ()

27.01 For agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

1 Name of Custodian(s)	2 Custodian's Address
UBS Financial Services Inc of PR	250 Munoz Rivera Ave San Juan, PR 00918
Popular Securities Inc	209 Munoz Rivera Ave Popular Center Plaza level San Juan PR 00918
Santander Securities	Santander Tower at San Patricio B7 Tabonuco Street Suite 1800 Guaynabo PR 00968-3028

27.02 For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation:

1 Name(s)	2 Location(s)	3 Complete Explanation (s)
.....
.....
.....

27.03 Have there been any changes, including name changes, in the custodian(s) identified in 26.01 during the current year? Yes () No (X)

27.04 If yes, give full and complete information relating thereto:

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason
.....
.....
.....

27.05 Identify all investment advisors, brokers/dealers or individuals acting on behalf of broker/dealers that have access to the investment accounts, handle securities and have authority to make investments on behalf of the reporting entity:

1 Central Registration Depository Number(s)	2 Name	3 Address
.....
.....
.....

GENERAL INTERROGATORIES

28.1 Does the reporting entity have any diversified mutual funds reported in Schedule D, Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5 (b) (1)])? Yes () No (X)

28.2 If yes, complete the following schedule:

1 CUSIP#	2 Name of Mutual Fund	3 Book/Adjusted Carrying Value
.....
.....
.....
.....
Line 28. 2998 from Overflow page
Line 28. 2999 TOTAL (9999999)

28.3 For each mutual fund listed in the table above, complete the following schedule:

1	2	3	4
Name of Mutual Fund (from above table)	Name of Significant Holding of the Mutual Fund	Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to the Holding	Date of Valuation
.....
.....
.....

29. Provide the following information for all short-term and long-term bonds and all preferred stocks. Do not substitute amortized value or statement value for fair value.

	1	2	3
	Statement (Admitted) Value	Fair Value	Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
29.1 Bonds	\$ 57,719,058	\$ 59,867,546	\$ 2,148,488
29.2 Preferred stocks	\$	\$	\$
29.3 Totals	\$ 57,719,058	\$ 59,867,546	\$ 2,148,488

29.4 Describe the sources or methods utilized in determining the fair values:
See Note # 20.

30.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D? Yes () No (X)

30.2 If the answer to 30.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source? Yes () No (X)

30.3 If the answer to 30.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:
See Note # 20.

31.1 Have all the filing requirements of the Purposes and Procedures manual of the NAIC Securities Valuation Office been followed? Yes () No (X)

31.2 If no, list exceptions:
.....
.....

GENERAL INTERROGATORIES

OTHER

32.1 Amount of payments to Trade Associations, service organizations and statistical or Rating Bureaus, if any? \$ 106,604

32.2 List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations and statistical or rating bureaus during the period covered by this statement.

1 Name	2 Amount Paid
Insurance Service Office	\$ 35,495
.....	\$
.....	\$
.....	\$

33.1 Amount of payments for legal expenses, if any? \$

33.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

1 Name	2 Amount Paid
.....	\$
.....	\$
.....	\$
.....	\$

34.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any? \$

34.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers or departments of government during the period covered by this statement.

1 Name	2 Amount Paid
.....	\$
.....	\$
.....	\$
.....	\$

GENERAL INTERROGATORIES
PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

1.1 Does the reporting entity have any direct Medicare Supplement Insurance in force? Yes () No (X)

1.2 If yes, indicate premium earned on U.S. business only. \$

1.3 What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit? \$

1.31 Reason for excluding:

1.4 Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Line (1.2) above. \$

1.5 Indicate total incurred claims on all Medicare Supplement insurance. \$

1.6 Individual policies:

Most current three years:

1.61 Total premium earned \$

1.62 Total incurred claims \$

1.63 Number of covered lives

All years prior to most current three years:

1.64 Total premium earned \$

1.65 Total incurred claims \$

1.66 Number of covered lives

1.7 Group policies:

Most current three years:

1.71 Total premium earned \$

1.72 Total incurred claims \$

1.73 Number of covered lives

All years prior to most current three years:

1.74 Total premium earned \$

1.75 Total incurred claims \$

1.76 Number of covered lives

2. Health Test:

	1 Current Year	2 Prior Year
2.1 Premium Numerator	\$	\$
2.2 Premium Denominator	\$	\$
2.3 Premium Ratio (Line 2.1/Line 2.2)
2.4 Reserve Numerator	\$	\$
2.5 Reserve Denominator	\$	\$
2.6 Reserve Ratio (Line 2.4/Line 2.5)

3.1 Does the reporting entity issue both participating and non-participating policies? Yes () No (X)

3.2 If yes, state the amount of calendar year premiums written on:

3.21 Participating policies \$

3.22 Non-participating policies \$

4. For Mutual reporting entities and Reciprocal Exchange only:

4.1 Does the reporting entity issue assessable policies? Yes () No ()

4.2 Does the reporting entity issue non-assessable policies? Yes () No ()

4.3 If assessable policies are issued, what is the extent of the contingent liability of the policyholders?

4.4 Total amount of assessments paid or ordered to be paid during the year on deposit notes or contingent premiums. \$

5. For Reciprocal Exchanges only:

5.1 Does the exchange appoint local agents? Yes () No ()

5.2 If yes, is the commission paid:

5.21 Out of Attorney's-in-fact compensation Yes () No () N/A (X)

5.22 As a direct expense of the exchange Yes () No () N/A (X)

5.3 What expenses of the Exchange are not paid out of the compensation of the Attorney-in-fact?

5.4 Has any Attorney-in-fact compensation, contingent on fulfillment of certain conditions, been deferred? Yes () No ()

5.5 If yes, give full information.

GENERAL INTERROGATORIES
PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

- 6.1 What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit of loss?
 The Company does not write workers' compensation .

- 6.2 Describe the method used to estimate this reporting entity's probable maximum insurance loss, and identify the type of insured exposures comprising that probable maximum loss, the locations of concentrations of those exposures and the external resources (such as consulting firms or computer software models), if any, used in the estimation process:
 The catastrophe loss analysis methodology is computer modeling. The Catastrophe exposures are for hurricane and earthquake (includes Fire).

- 6.3 What provision has this reporting entity made (such as a catastrophic reinsurance program) to protect itself from an excessive loss arising from the types and concentrations of insured exposures comprising its probable maximum property insurance loss?
 We purchase catastrophe reinsurance in excess of what is estimated by PML.

- 6.4 Does the reporting entity carry catastrophe reinsurance protection for at least one reinstatement, in an amount sufficient to cover its estimated probable maximum loss attributable to a single loss event or occurrence? Yes (X) No ()
- 6.5 If no, describe any arrangements or mechanisms employed by the reporting entity to supplement its catastrophe reinsurance program or to hedge its exposure to unreinsured catastrophic loss.

- 7.1 Has the reporting entity reinsured any risk with any other entity under a quota share reinsurance contract that includes a provision that would limit the reinsurer's losses below the stated quota share percentage (e.g., a deductible, a loss ratio corridor, a loss cap, an aggregate limit or any similar provisions)? Yes () No (X)
- 7.2 If yes, indicate the number of reinsurance contracts containing such provisions.
- 7.3 If yes, does the amount of reinsurance credit taken reflect the reduction in quota share coverage caused by any applicable limiting provision(s)? Yes () No (X)
- 8.1 Has this reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on this risk, or portion thereof, reinsured? Yes () No (X)
- 8.2 If yes, give full information.

- 9.1 Has the reporting entity ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates) for which during the period covered by the statement: (i) it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as reinsurance and not as a deposit; and (iii) the contract(s) contain one or more of the following features or other features that would have similar results:
 (a) A contract term longer than two years and the contract is noncancellable by the reporting entity during the contract term;
 (b) A limited or conditional cancellation provision under which cancellation triggers an obligation by the reporting entity, or an affiliate of the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an affiliate of the reinsurer;
 (c) Aggregate stop loss reinsurance coverage;
 (d) A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such provisions which are only triggered by a decline in the credit status of the other party;
 (e) A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no activity during the period); or
 (f) Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement to the ceding entity. Yes () No (X)
- 9.2 Has the reporting entity during the period covered by the statement ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates), for which, during the period covered by the statement, it recorded a positive or negative underwriting result greater than 5% of the prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; excluding cessions to approved pooling arrangements or to captive insurance companies that are directly or indirectly controlling, controlled by, or under common control with (i) one or more unaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity is a member where:
 (a) The written premium ceded to the reinsurer by the reporting entity or its affiliates represents fifty percent (50%) or more of the entire direct and assumed premium written by the reinsurer based on its most recently available financial statement; or
 (b) Twenty-five percent (25%) or more of the written premium ceded to the reinsurer has been retroceded back to the reporting entity or its affiliates in a separate reinsurance contract. Yes () No (X)
- 9.3 If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9:
 (a) The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income;
 (b) A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and
 (c) A brief discussion of management's principle objectives in entering into the reinsurance contract including the economic purpose to be achieved.
- 9.4 Except for transactions meeting the requirements of paragraph 32 of SSAP No. 62R, Property and Casualty Reinsurance, has the reporting entity ceded any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the financial statement, and either:
 (a) Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or
 (b) Accounted for that contract as reinsurance under GAAP and as a deposit under SAP? Yes () No (X)
- 9.5 If yes to 9.4, explain in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is treated differently for GAAP and SAP.
- 9.6 The reporting entity is exempt from the Reinsurance Attestation Supplement under one or more of the following criteria:
 (a) The entity does not utilize reinsurance; or Yes () No (X)
 (b) The entity only engages in a 100% quota share contract with an affiliate and the affiliated or lead company has filed an attestation supplement; or, Yes () No (X)
 (c) The entity has no external cessions and only participates in an intercompany pool and the affiliated or lead company has filed an attestation supplement. Yes () No (X)

GENERAL INTERROGATORIES
PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

10. If the reporting entity has assumed risks from another entity, there should be charged on account of such reinsurances a reserve equal to that which the original reporting entity would have been required to charge had it retained the risks. Has this been done? Yes () No () N/A (X)
- 11.1 Has this reporting entity guaranteed policies issued by any other entity and now in force? Yes () No (X)
- 11.2 If yes, give full information.

- 12.1 If the reporting entity recorded accrued retrospective premiums on insurance contracts on Line 15.3 of the asset schedule, Page 2, state the amount of corresponding liabilities recorded for:
- | | | |
|---|--|----------|
| 12.11 Unpaid losses | | \$ |
| 12.12 Unpaid underwriting expenses (including loss adjustment expenses) | | \$ |
- 12.2 Of the amount on Line 15.3 of the asset schedule, Page 2, state the amount which is secured by letters of credit, collateral and other funds: \$
- 12.3 If the reporting entity underwrites commercial insurance risks, such as workers' compensation, are premium notes or promissory notes accepted from its insureds covering unpaid premiums and/or unpaid losses? Yes () No () N/A (X)
- 12.4 If yes, provide the range of interest rates charged under such notes during the period covered by this statement:
- | | | |
|------------|--|--------|
| 12.41 From | |% |
| 12.42 To | |% |
- 12.5 Are letters of credit or collateral and other funds received from insureds being utilized by the reporting entity to secure premium notes or promissory notes taken by the reporting entity, or to secure any of the reporting entity's reported direct unpaid loss reserves, including unpaid losses under loss deductible features of commercial policies? Yes () No (X)
- 12.6 If yes, state the amount thereof at December 31 of the current year:
- | | | |
|----------------------------------|--|----------|
| 12.61 Letters of credit | | \$ |
| 12.62 Collateral and other funds | | \$ |
- 13.1 Largest net aggregate amount insured in any one risk (excluding workers' compensation): \$ 200,000
- 13.2 Does any reinsurance contract considered in the calculation of this amount include an aggregate limit of recovery without also including a reinstatement provision? Yes () No (X)
- 13.3 State the number of reinsurance contracts (excluding individual facultative risk certificates, but including facultative programs, automatic facilities or facultative obligatory contracts) considered in the calculation of the amount.
- 14.1 Is the company a cedant in a multiple cedant reinsurance contract? Yes () No (X)
- 14.2 If yes, please describe the method of allocating and recording reinsurance among the cedants:

- 14.3 If the answer to 14.1 is yes, are the methods described in item 14.2 entirely contained in the respective multiple cedant reinsurance contracts? Yes () No (X)
- 14.4 If the answer to 14.3 is no, are the methods described in 14.2 entirely contained in written agreements? Yes () No (X)
- 14.5 If the answer to 14.4 is no, please explain:
 N/A.

- 15.1 Has the reporting entity guaranteed any financed premium accounts? Yes () No (X)
- 15.2 If yes, give full information.

GENERAL INTERROGATORIES
PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

16.1 Does the reporting entity write any warranty business? Yes () No (X)

If yes, disclose the following information for each of the following types of warranty coverage:

	1 Direct Losses Incurred	2 Direct Losses Unpaid	3 Direct Written Premium	4 Direct Premium Unearned	5 Direct Premium Earned
16.11 Home	\$	\$	\$	\$	\$
16.12 Products	\$	\$	\$	\$	\$
16.13 Automobile	\$	\$	\$	\$	\$
16.14 Other*	\$	\$	\$	\$	\$

* Disclose type of coverage:
.....
.....

17.1 Does the reporting entity include amounts recoverable on unauthorized reinsurance in Schedule F - Part 3 that it excludes from Schedule F - Part 5? Yes () No (X)

Included but not reported losses on contracts in force prior to July 1, 1984, and not subsequently renewed are exempt from inclusion in Schedule F - Part 5.
Provide the following information for this exemption:

17.11 Gross amount of unauthorized reinsurance in Schedule F - Part 3 excluded from Schedule F - Part 5	\$
17.12 Unfunded portion of Interrogatory 17.11	\$
17.13 Paid losses and loss adjustment expenses portion of Interrogatory 17.11	\$
17.14 Case reserves portion of Interrogatory 17.11	\$
17.15 Incurred but not reported portion of Interrogatory 17.11	\$
17.16 Unearned premium portion of Interrogatory 17.11	\$
17.17 Contingent commission portion of Interrogatory 17.11	\$

Provide the following information for all other amounts included in Schedule F - Part 3 and excluded from Schedule F - Part 5, not included above.

17.18 Gross amount of unauthorized reinsurance in Schedule F - Part 3 excluded from Schedule F - Part 5	\$
17.19 Unfunded portion of Interrogatory 17.18	\$
17.20 Paid losses and loss adjustment expenses portion of Interrogatory 17.18	\$
17.21 Case reserves portion of Interrogatory 17.18	\$
17.22 Incurred but not reported portion of Interrogatory 17.18	\$
17.23 Unearned premium portion of Interrogatory 17.18	\$
17.24 Contingent commission portion of Interrogatory 17.18	\$

18.1 Do you act as a custodian for health savings accounts? Yes () No (X)

18.2 If yes, please provide the amount of custodial funds held as of the reporting date. \$

18.3 Do you act as an administrator for health savings accounts? Yes () No (X)

18.4 If yes, please provide the balance of the funds administered as of the reporting date. \$

FIVE-YEAR HISTORICAL DATA

Show amounts in whole dollars only, no cents; show percentages to one decimal place, i. e. 17.6.

	1 2010	2 2009	3 2008	4 2007	5 2006
Gross Premiums Written (Page 8, Part 1B, Columns 1, 2 and 3)					
1. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 and 19.3, 19.4)	984,038	1,193,286	1,299,763	1,473,838	1,427,888
2. Property lines (Lines 1, 2, 9, 12, 21 and 26)	25,309,479	25,846,503	19,169,140	15,167,293	13,620,982
3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 and 27)	6,886,164	9,507,480	9,611,959	9,221,646	9,196,390
4. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 and 34)	307,232	319,147	423,542	337,226	348,931
5. Nonproportional reinsurance lines (Lines 31, 32 and 33)					
6. Total (Line 35)	33,486,913	36,866,416	30,504,404	26,200,003	24,594,191
Net Premiums Written (Page 8, Part 1B, Column 6)					
7. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 and 19.3, 19.4)	435,543	573,738	635,391	752,603	725,364
8. Property lines (Lines 1, 2, 9, 12, 21 and 26)	17,953,311	19,533,337	13,741,376	11,255,701	10,094,152
9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 and 27)	4,532,514	5,896,863	5,900,225	5,604,784	5,331,066
10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 and 34)	202,249	259,713	277,640	204,629	225,844
11. Nonproportional reinsurance lines (Line 31, 32 and 33)					
12. Total (Line 35)	23,123,617	26,263,651	20,554,632	17,817,717	16,376,426
Statement of Income (Page 4)					
13. Net underwriting gain (loss) (Line 8)	3,427,362	2,902,157	3,159,173	3,191,055	1,435,016
14. Net investment gain (loss) (Line 11)	3,814,052	7,254,756	1,241,665	3,362,310	2,857,554
15. Total other income (Line 15)	6,496	122,646	92,143	40,748	44,357
16. Dividends to policyholders (Line 17)					
17. Federal and foreign income taxes incurred (Line 19)	340,840	3,940,741	816,604	1,146,930	314,340
18. Net income (Line 20)	6,907,070	6,338,818	3,676,377	5,447,183	4,022,587
Balance Sheet Lines (Pages 2 and 3)					
19. Total admitted assets excluding protected cell business (Page 2, Line 26, Column 3)	85,012,873	79,503,078	69,745,055	68,634,322	62,909,134
20. Premiums and considerations (Page 2, Column 3)					
20.1 In course of collection (Line 15.1)	6,430,965	6,708,998	3,711,503	2,621,924	2,407,853
20.2 Deferred and not yet due (Line 15.2)					
20.3 Accrued retrospective premiums (Line 15.3)					
21. Total liabilities excluding protected cell business (Page 3, Line 26)	30,772,146	29,365,928	22,126,388	21,614,961	19,682,185
22. Losses (Page 3, Line 1)	4,510,304	4,525,960	5,132,153	4,761,432	4,524,442
23. Loss adjustment expenses (Page 3, Line 3)	1,535,455	1,587,078	1,607,075	1,620,133	1,630,508
24. Unearned premiums (Page 3, Line 9)	16,396,271	16,350,813	12,929,938	11,795,497	11,567,499
25. Capital paid up (Page 3, Line 30 and Line 31)	2,800,000	2,800,000	2,800,000	2,800,000	2,800,000
26. Surplus as regards policyholders (Page 3, Line 37)	54,240,727	50,137,150	47,618,667	47,019,361	43,226,949
Cash Flow (Page 5)					
27. Net cash from operations (Line 11)	5,525,634	4,277,233	3,927,480	5,832,600	3,726,249
Risk-Based Capital Analysis					
28. Total adjusted capital	54,240,727	50,137,150	47,618,667	46,990,400	43,226,949
29. Authorized control level risk-based capital	2,724,481	2,218,598	1,629,601	2,040,847	2,438,754
Percentage Distribution of Cash, Cash Equivalents and Invested Assets (Page 2, Column 3) (Item divided by Page 2, Line 12, Column 3) x 100.0					
30. Bonds (Line 1)	75.4	75.3	75.8	70.1	57.9
31. Stocks (Line 2.1 and Line 2.2)	8.9	13.2	8.9	11.2	28.2
32. Mortgage loans on real estate (Line 3.1 and Line 3.2)	5.6	6.0	8.2	8.0	5.9
33. Real estate (Lines 4.1, 4.2 and 4.3)					
34. Cash, cash equivalents and short-term investments (Line 5)	10.1	5.5	7.2	10.6	8.1
35. Contact loans (Line 6)					
36. Derivatives (Line 7)		X X X	X X X	X X X	X X X
37. Other invested assets (Line 8)					
38. Receivables for securities (Line 9)					
39. Securities lending reinvested collateral assets (Line 10)		X X X	X X X	X X X	X X X
40. Aggregate write-ins for invested assets (Line 11)					
41. Cash, cash equivalents and invested assets (Line 12)	100.0	100.0	100.0	100.0	100.0
Investments in Parent, Subsidiaries and Affiliates					
42. Affiliated bonds (Schedule D, Summary, Line 12, Column 1)					
43. Affiliated preferred stocks (Schedule D, Summary, Line 18, Column 1)					
44. Affiliated common stocks (Schedule D, Summary, Line 24, Column 1)					
45. Affiliated short-term investments (Schedule DA Verification, Column 5, Line 10)					
46. Affiliated mortgage loans on real estate					
47. All other affiliated					
48. Total of above Line 42 through Line 47					
49. Percentage of investments in parent, subsidiaries and affiliates to surplus as regards policyholders (Line 48 above divided by Page 3, Column 1, Line 37 x 100.0)					

FIVE-YEAR HISTORICAL DATA

(Continued)

	1 2010	2 2009	3 2008	4 2007	5 2006
Capital and Surplus Accounts (Page 4)					
50. Net unrealized capital gains (losses) (Line 24)	1,167,570	(660,986)	(1,014,382)	(336,225)	(899,612)
51. Dividends to stockholders (Line 35)	(3,046,530)	(2,030,189)	(2,214,769)	(1,519,848)	(1,228,679)
52. Change in surplus as regards policyholders for the year (Line 38)	4,103,577	2,518,483	599,306	3,792,412	2,074,176
Gross Losses Paid (Page 9, Part 2, Columns 1 and 2)					
53. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 and 19.3, 19.4)	1,112,145	355,948	255,028	397,243	809,793
54. Property lines (Lines 1, 2, 9, 12, 21 and 26)	638,289	685,068	666,795	862,540	1,047,563
55. Property and liability combined lines (Lines 3, 4, 5, 8, 22 and 27)	1,387,207	1,922,256	1,308,475	975,199	797,361
56. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 and 34)	103,640	17,121	(17,750)	(16,110)	72,579
57. Nonproportional reinsurance lines (Lines 31, 32, and 33)					
58. Total (Line 35)	3,241,281	2,980,393	2,212,548	2,218,872	2,727,296
Net Losses Paid (Page 9, Part 2, Column 4)					
59. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 and 19.3, 19.4)	437,065	352,354	255,028	372,409	734,483
60. Property lines (Lines 1, 2, 9, 12, 21 and 26)	638,289	680,928	666,795	858,537	1,047,563
61. Property and liability combined lines (Lines 3, 4, 5, 8, 22 and 27)	790,489	1,611,499	1,287,941	825,913	689,811
62. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 and 34)	103,640	17,121	(45,252)	(37,625)	64,176
63. Nonproportional reinsurance lines (Lines 31, 32, and 33)					
64. Total (Line 35)	1,969,483	2,661,902	2,164,512	2,019,234	2,536,033
Operating Percentages (Page 4) (Item divided by Page 4, Line 1) x 100.0					
65. Premiums earned (Line 1)	100.0	100.0	100.0	100.0	100.0
66. Losses incurred (Line 2)	8.5	9.0	13.1	12.8	12.9
67. Loss expenses incurred (Line 3)	7.5	10.6	11.2	11.6	14.5
68. Other underwriting expenses incurred (Line 4)	69.1	67.7	59.5	57.4	63.5
69. Net underwriting gain (loss) (Line 8)	14.9	12.7	16.3	18.1	9.2
Other Percentages					
70. Other underwriting expenses to net premiums written (Page 4, Line 4 plus Line 5 minus Line 15 divided by Page 8, Part 1B, Column 6, Line 35 x 100.0)	69.0	58.4	55.7	56.4	60.4
71. Losses and loss expenses incurred to premiums earned (Page 4, Line 2 plus Line 3 divided by Page 4, Line 1 x 100.0)	16.0	19.6	24.3	24.5	27.4
72. Net premiums written to policyholders' surplus (Page 8, Part 1B, Column 6, Line 35 divided by Page 3, Line 37, Column 1 x 100.0)	42.6	52.4	43.2	37.9	37.9
One Year Loss Development (000 omitted)					
73. Development in estimated losses and loss expenses incurred prior to current year (Schedule P, Part 2 - Summary, Line 12, Column 11)	(1,290)	(1,629)	(1,504)	(1,334)	(1,506)
74. Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 73 above divided by Page 4, Line 21, Column 1 x 100.0)	(2.6)	(3.4)	(3.2)	(3.1)	(3.7)
Two Year Loss Development (000 omitted)					
75. Development in estimated losses and loss expenses incurred 2 years before the current year and prior year (Schedule P, Part 2 - Summary, Line 12, Column 12)	(1,630)	(1,817)	(1,503)	(2,128)	(1,986)
76. Percent of development of losses and loss expenses incurred to reported policyholders' surplus of second prior year end (Line 75 above divided by Page 4, Line 21, Column 2 x 100.0)	(3.4)	(3.9)	(3.5)	(5.2)	(4.9)

Note: If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure requirements of SSAP No. 3, Accounting Changes and Correction of Errors?
If no, please explain:

Yes () No ()

SCHEDULE P - ANALYSIS OF LOSSES AND LOSS EXPENSES

SCHEDULE P - PART 1 - SUMMARY

(\$000 Omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments							12 Number of Claims Reported - Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (Columns 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received		11 Total Net Paid (Columns 4 - 5 + 6 - 7 + 8 - 9)
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior	X X X	X X X	X X X	(30)	777	898	129	1,787		30	(30)	X X X
2. 2001	22,222	10,461	11,761	3,539	777	898	129	1,787			5,318	X X X
3. 2002	18,740	10,027	8,713	2,531	373	625	74	928			3,637	X X X
4. 2003	20,856	7,510	13,346	2,672	506	416	18	974			3,538	X X X
5. 2004	22,025	8,264	13,761	2,581	79	618	1	978			4,097	X X X
6. 2005	22,511	8,086	14,425	2,605	115	584	9	1,137			4,202	X X X
7. 2006	23,873	8,217	15,656	2,356	86	471	4	1,642		8	4,379	X X X
8. 2007	25,429	7,839	17,590	1,908	36	298	1	1,640			3,809	X X X
9. 2008	29,416	9,997	19,419	3,249	1,001	461	86	1,683		5	4,306	X X X
10. 2009	33,797	10,955	22,842	2,447	530	315	37	1,718		62	3,913	X X X
11. 2010	33,593	10,515	23,078	1,308	95	158		1,198		59	2,569	X X X
12. Totals	X X X	X X X	X X X	25,166	3,598	4,844	359	13,685		164	39,738	X X X

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding - Direct & Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1.													X X X
2.													X X X
3.	75											75	X X X
4.													X X X
5.			28	1			22	15	31			65	X X X
6.	193	38	28	1			22	15	31			220	X X X
7.	350	(2)	28	1			22	15	31			417	X X X
8.	765	400	52	3			29	16	47			474	X X X
9.	368	(22)	80	4			50	31	79			564	X X X
10.	705	3	178	10			104	64	162			1,072	X X X
11.	736	69	1,601	170			472	262	851			3,159	X X X
12.	3,192	486	1,995	190			721	418	1,232			6,046	X X X

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter - Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1.	X X X	X X X	X X X	X X X	X X X	X X X			X X X		
2.	6,224	906	5,318	28.0	8.7	45.2					
3.	4,159	447	3,712	22.2	4.5	42.6				75	
4.	4,062	524	3,538	19.5	7.0	26.5					
5.	4,258	96	4,162	19.3	1.2	30.2				27	38
6.	4,600	178	4,422	20.4	2.2	30.7				182	38
7.	4,900	104	4,796	20.5	1.3	30.6				379	38
8.	4,739	456	4,283	18.6	5.8	24.3				414	60
9.	5,970	1,100	4,870	20.3	11.0	25.1				466	98
10.	5,629	644	4,985	16.7	5.9	21.8				870	202
11.	6,324	596	5,728	18.8	5.7	24.8				2,098	1,061
12.	X X X	X X X	X X X	X X X	X X X	X X X			X X X	4,511	1,535

Note: Parts 2 and 4 are gross of all discounting, including tabular discounting. Part 1 is gross of only nontabular discounting, which is reported in Columns 32 and 33 of Part 1. The tabular discount, if any, is reported in the Notes to Financial Statements which will reconcile Part 1 with Parts 2 and 4.

SCHEDULE P - PART 2 - SUMMARY

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT		
	1 2001	2 2002	3 2003	4 2004	5 2005	6 2006	7 2007	8 2008	9 2009	10 2010	11 One Year	12 Two Year	
1. Prior										(30)	(30)	(30)	
2. 2001	4,708	3,785	3,817	3,811	3,718	3,620	3,657	3,605	3,526	3,531	5	(74)	
3. 2002	XXX	3,920	2,917	3,185	2,876	2,761	2,799	2,814	2,783	2,784	1	(30)	
4. 2003	XXX	XXX	4,188	2,813	2,616	2,629	2,573	2,547	2,596	2,564	(32)	17	
5. 2004	XXX	XXX	XXX	5,091	3,587	3,426	3,332	3,217	3,151	3,153	2	(64)	
6. 2005	XXX	XXX	XXX	XXX	4,951	3,329	3,351	3,281	3,219	3,254	35	(27)	
7. 2006	XXX	XXX	XXX	XXX	XXX	4,155	2,957	2,978	3,054	3,123	69	145	
8. 2007	XXX	XXX	XXX	XXX	XXX	XXX	4,063	2,723	2,598	2,596	(2)	(127)	
9. 2008	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,548	3,165	3,108	(57)	(1,440)	
10. 2009	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,386	3,105	(1,281)	XXX	
11. 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,679	XXX	XXX	
											12. Totals	(1,290)	(1,630)

SCHEDULE P - PART 3 - SUMMARY

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11	12
	1 2001	2 2002	3 2003	4 2004	5 2005	6 2006	7 2007	8 2008	9 2009	10 2010	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
1. Prior	0 0 0									(30)	XXX	XXX
2. 2001	1,468	2,600	2,878	3,252	3,289	3,422	3,484	3,525	3,526	3,531	XXX	XXX
3. 2002	XXX	1,026	1,811	2,408	2,587	2,631	2,695	2,708	2,708	2,709	XXX	XXX
4. 2003	XXX	XXX	1,190	2,019	2,294	2,448	2,474	2,486	2,564	2,564	XXX	XXX
5. 2004	XXX	XXX	XXX	1,764	2,802	2,957	3,043	3,121	3,119	3,119	XXX	XXX
6. 2005	XXX	XXX	XXX	XXX	1,896	2,412	2,767	2,880	3,015	3,065	XXX	XXX
7. 2006	XXX	XXX	XXX	XXX	XXX	1,457	2,135	2,398	2,680	2,737	XXX	XXX
8. 2007	XXX	XXX	XXX	XXX	XXX	XXX	1,228	1,690	2,026	2,169	XXX	XXX
9. 2008	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,614	2,285	2,623	XXX	XXX
10. 2009	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,713	2,195	XXX	XXX
11. 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,371	XXX	XXX

SCHEDULE P - PART 4 - SUMMARY

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 2001	2 2002	3 2003	4 2004	5 2005	6 2006	7 2007	8 2008	9 2009	10 2010
1. Prior										
2. 2001	2,091	152	69	46	22	26	29			
3. 2002	XXX	1,910	158	69	45	26	29	31		
4. 2003	XXX	XXX	1,887	157	69	54	29	31	32	
5. 2004	XXX	XXX	XXX	1,890	157	81	57	31	32	34
6. 2005	XXX	XXX	XXX	XXX	1,917	178	86	59	32	34
7. 2006	XXX	XXX	XXX	XXX	XXX	1,904	190	92	60	34
8. 2007	XXX	XXX	XXX	XXX	XXX	XXX	1,932	201	94	62
9. 2008	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,961	205	95
10. 2009	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,623	208
11. 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,641

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

States, Etc.	1 Active Status	Gross Premiums, Including Policy and Membership Fees Less Return Premiums and Premiums on Policies Not Taken		4 Dividends Paid or Credited to Policyholders on Direct Business	5 Direct Losses Paid (Deducting Salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Finance and Service Charges Not Included in Premiums	9 Direct Premium Written for Federal Purchasing Groups (Included in Column 2)
		2 Direct Premiums Written	3 Direct Premiums Earned						
1. Alabama	AL	N							
2. Alaska	AK	N							
3. Arizona	AZ	N							
4. Arkansas	AR	N							
5. California	CA	N							
6. Colorado	CO	N							
7. Connecticut	CT	N							
8. Delaware	DE	N							
9. Dist. Columbia	DC	N							
10. Florida	FL	N							
11. Georgia	GA	N							
12. Hawaii	HI	N							
13. Idaho	ID	N							
14. Illinois	IL	N							
15. Indiana	IN	N							
16. Iowa	IA	N							
17. Kansas	KS	N							
18. Kentucky	KY	N							
19. Louisiana	LA	N							
20. Maine	ME	N							
21. Maryland	MD	N							
22. Massachusetts	MA	N							
23. Michigan	MI	N							
24. Minnesota	MN	N							
25. Mississippi	MS	N							
26. Missouri	MO	N							
27. Montana	MT	N							
28. Nebraska	NE	N							
29. Nevada	NV	N							
30. New Hampshire	NH	N							
31. New Jersey	NJ	N							
32. New Mexico	NM	N							
33. New York	NY	N							
34. North Carolina	NC	N							
35. North Dakota	ND	N							
36. Ohio	OH	N							
37. Oklahoma	OK	N							
38. Oregon	OR	N							
39. Pennsylvania	PA	N							
40. Rhode Island	RI	N							
41. South Carolina	SC	N							
42. South Dakota	SD	N							
43. Tennessee	TN	N							
44. Texas	TX	N							
45. Utah	UT	N							
46. Vermont	VT	N							
47. Virginia	VA	N							
48. Washington	WA	N							
49. West Virginia	WV	N							
50. Wisconsin	WI	N							
51. Wyoming	WY	N							
52. American Samoa	AS	N							
53. Guam	GU	N							
54. Puerto Rico	PR	N	33,486,913	33,591,003	3,241,281	1,938,896	5,187,445		
55. U.S. Virgin Islands	VI	N							
56. Northern Mariana Islands	MP	N							
57. Canada	CN	N							
58. Aggregate other alien	OT	X X X							
59. Totals	(a)		33,486,913	33,591,003	3,241,281	1,938,896	5,187,445		
DETAILS OF WRITE-INS									
5801.		X X X							
5802.		X X X							
5803.		X X X							
5898. Summary of remaining write-ins for Line 58 from overflow page		X X X							
5899. Totals (Line 5801 through Line 5803 plus Line 5898) (Line 58 above)		X X X							

(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) None of the above - Not allowed to write business in the state.

Explanation of basis of allocation of premiums by states, etc.

(a) Insert the number of "L" responses except for Canada and Other Alien.

NONE

Property and Casualty

Annual Statement Blank Alphabetical Index

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