Amended Explanation Page

This amendment is to:

1) Upload Note 30 electronically.
2) Upload Actuarial Opinion, exhibit A, #9 electronically.
3) Actuarial Opinion, Exhibit B – Fill in Statutory Surplus, Line 7.

PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

12233201120100105 2011 Document Code: 201

ANNUAL STATEMENT

For the Year Ended December 31, 2011

OF THE CONDITION AND AFFAIRS OF THE

HEALTHCARE UNDERWRITERS GROUP MUTUAL OF OHIO

NAIC Group Code 0000 (Current Period), 0000 (Prior Period) NAIC Company Code 12233 Employer's ID Number 74-3129288

Organized under the Laws of Ohio, State of Domicile or Port of Entry Ohio

Country of Domicile United States of America

Incorporated/Organized 11/30/2004 Commenced Business 12/14/2004

Statutory Home Office 450 Alkyre Run, Suite 360 (Street and Number), Westerville, OH 43082-6914 (City or Town, State and Zip Code)

Main Administrative Office 1250 South Pine Island Road, Suite 300 (Street and Number)

Plantation, FL 33324-4402 (City or Town, State and Zip Code) (866)484-5715 (Area Code) (Telephone Number)

Mail Address 1250 South Pine Island Road, Suite 300 (Street and Number or P.O. Box), Plantation, FL 33324-4402 (City or Town, State and Zip Code)

Primary Location of Books and Records 1250 South Pine Island Road, Suite 300 (Street and Number)

Plantation, FL 33324-4402 (City or Town, State and Zip Code) (866)484-5715 (Area Code) (Telephone Number)

Internet Website Address www.hugroupoh.com

Statutory Statement Contact Thomas William Mueller (Name) (866)484-5716 (Area Code)(Telephone Number)(Extension)

tmueller@HUgroups.com (E-Mail Address) (877)895-0996 (Fax Number)

OFFICERS

Name	Title
Howard Irwin Dickey-White MD	President
Gary Birnbaum MD, JD	Chairperson
John Michael Surso MD	Vice-Chairperson
Steven Lee Salman JD	Chief Executive Officer
Joseph Richard Hellmann MD	Secretary
Joseph James Zigray CPA	Treasurer
David Wayne Lester CPA	VP-CFO & Assistant Treasurer
Joshua Marc Salman	VP-Chief Operating Officer
Morton Caldwell Bell	VP-Chief Underwriting Officer
William Carl Ludwig JD	VP-Chief Claims Officer

OTHERS

Ronald Joseph Goff, VP-Chief Sales & Marketing Officer
Thomas William Mueller CPA, VP Finance & Controller
David Wayne McKenney, Regional VP-Claims
Susan Elaine Salman, Assistant Secretary #

DIRECTORS OR TRUSTEES

Gary Birnbaum MD, JD
Howard Irwin Dickey-White MD
Steven Lee Salman JD
John Michael Surso MD
Thayne Robert Alred MD #
Christopher Boshkos MD
Joseph Richard Hellmann MD
Darrel Joseph Scott JD
Joseph James Zigray CPA

State of Ohio
County of Franklin ss

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of the 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.

(Signature)	(Signature)	(Signature)
Howard Irwin Dickey-White, MD	Joseph Richard Hellmann, MD	Joseph James Zigray, CPA
(Printed Name)	(Printed Name)	(Printed Name)
1.	2.	3.
President	Secretary	Treasurer
(Title)	(Title)	(Title)

Subscribed and sworn to before me this _____ day of _____, 2012

a. Is this an original filing? Yes[ ] No[X]
b. If no, 1. State the amendment number 1
2. Date filed 04/03/2012
3. Number of pages attached 2

(Notary Public Signature)