



ANNUAL STATEMENT
FOR THE YEAR ENDED DECEMBER 31, 2011
OF THE CONDITION AND AFFAIRS OF THE
OHIO BAR LIAB INS CO

NAIC Group Code 0000, NAIC Company Code 37176 Employer's ID Number 31-0947214

(Current Period) (Prior Period)

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

Country of Domicile US

Incorporated/Organized December 5, 1978 Commenced Business September 1, 1979

Statutory Home Office 1650 LAKE SHORE DRIVE, COLUMBUS, Ohio 43204

(Street and Number, City or Town, State and Zip Code)

Main Administrative Office 1650 LAKE SHORE DRIVE, COLUMBUS, Ohio 43204 614-488-7924

(Street and Number, City or Town, State and Zip Code) (Area Code) (Telephone Number)

Mail Address PO BOX 2708, COLUMBUS, Ohio 43216-2708

(Street and Number or P. O. Box, City or Town, State and Zip Code)

Primary Location of Books and Records 1650 LAKE SHORE DRIVE, COLUMBUS, Ohio 43204

(Street and Number, City or Town, State and Zip Code)

614-488-7924

(Area Code) (Telephone Number)

Internet Website Address www.oblic.com

Statutory Statement Contact JEFFERY PEARSON 614-488-7924

(Name) (Area Code) (Telephone Number) (Extension)

jpearson@oblic.com 614-488-7936

(E-Mail Address) (Fax Number)

OFFICERS
FREDERICK HUNKER (Vice President)
DENNY L RAMEY (Treasurer)

OTHER OFFICERS

DIRECTORS OR TRUSTEES

JOHN MARSHALL ADAMS
JOHN THOMAS BROWN
BARBARA J HOWARD
THOMAS D LAMMERS
JORDAN A MILLER, JR
DENNY L RAMEY
DAVID PETER RUPP, JR
JOHN S STITH
THOMAS M TAGGART
ROBIN G WEAVER

PAULA LOUISE BROOKS
PARISS M COLEMAN, II
JAMES R JEFFERY
DOLORIS FINCHER LEARMONTH
FREDERICK L OREMUS
CARMEN V ROBERTO
HEATHER G SOWALD
JOSEPH THOMAS SVETE
DUKE WINSTON THOMAS
JAMES M WILES

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 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.

FREDERICK HUNKER
Vice President

DENNY L RAMEY
Treasurer

Subscribed and sworn to before me this 7 day of March, 2012

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)	24,606,645		24,606,645	22,329,342
2. Stocks (Schedule D):				
2.1 Preferred stocks				1,016,112
2.2 Common stocks	6,116,189		6,116,189	6,270,344
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens				
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 (\$ 382,472 , Schedule E - Part 1) , cash equivalents (\$, Schedule E - Part 2) and short-term investments (\$ 1,408,414 , Schedule DA)	1,790,886		1,790,886	3,777,503
6. Contract loans (including \$ premium notes)				
7. Derivatives (Schedule DB)				
8. Other invested assets (Schedule BA)				
9. Receivables for securities				
10. Securities lending reinvested collateral assets (Schedule DL)				
11. Aggregate write-ins for invested assets				
12. Subtotals, cash and invested assets (Line 1 through Line 11)	32,513,720		32,513,720	33,393,301
13. Title plants less \$ charged off (for Title insurers only)				
14. Investment income due and accrued	291,126		291,126	268,652
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	467,783		467,783	375,700
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				
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	399,169	157,134	242,035	220,371
18.2 Net deferred tax asset	511,933	131,227	380,706	362,247
19. Guaranty funds receivable or on deposit				
20. Electronic data processing equipment and software				
21. Furniture and equipment, including health care delivery assets (\$)	1,946,880	1,946,880		
22. Net adjustment in assets and liabilities due to foreign exchange rates				
23. Receivables from parent, subsidiaries and affiliates				
24. Health care (\$) and other amounts receivable				
25. Aggregate write-ins for other than invested assets				
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Line 12 to Line 25)	36,130,611	2,235,241	33,895,370	34,620,271
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts				
28. Total (Line 26 and Line 27)	36,130,611	2,235,241	33,895,370	34,620,271
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.				
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)				

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE OHIO BAR LIAB INS CO

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Losses (Part 2A, Line 35, Column 8)	5,392,851	5,019,481
2. Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Columnn 6)		
3. Loss adjustment expenses (Part 2A, Line 35, Column 9)	1,725,134	1,796,698
4. Commissions payable, contingent commissions and other similar charges		
5. Other expenses (excluding taxes, licenses and fees)	18,143	22,422
6. Taxes, licenses and fees (excluding federal and foreign income taxes)	37	37
7.1 Current federal and foreign income taxes (including \$ on realized capital gains (losses))		
7.2 Net deferred tax liability		
8. Borrowed money \$ and interest thereon \$		
9. Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of \$ 598,391 and including warranty reserves of \$ and accrued accident and health experience rating refunds including \$ for medical loss ratio rebate per the Public Health Service Act)	2,151,156	1,970,082
10. Advance premium	154,563	74,798
11. Dividends declared and unpaid:		
11.1 Stockholders		
11.2 Policyholders		
12. Ceded reinsurance premiums payable (net of ceding commissions)	295,378	329,498
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		
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	375,425	374,031
26. Total liabilities excluding protected cell liabilities (Line 1 through Line 25)	10,112,687	9,587,047
27. Protected cell liabilities		
28. Total liabilities (Line 26 and Line 27)	10,112,687	9,587,047
29. Aggregate write-ins for special surplus funds		
30. Common capital stock	1,000,000	1,000,000
31. Preferred capital stock		
32. Aggregate write-ins for other than special surplus funds		
33. Surplus notes		
34. Gross paid in and contributed surplus	1,000,000	1,000,000
35. Unassigned funds (surplus)	21,782,683	23,033,224
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)	23,782,683	25,033,224
38. Totals (Page 2, Line 28, Column 3)	33,895,370	34,620,271
DETAILS OF WRITE-INS		
2501. CLE COUPON	374,466	374,031
2502. HEALTH INSURANCE	959	
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)	375,425	374,031
2901.		
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)		
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)		

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE OHIO BAR LIAB INS CO

STATEMENT OF INCOME

UNDERWRITING INCOME	1	2
	Current Year	Prior Year
1. Premiums earned (Part 1, Line 35, Column 4)	4,426,957	4,190,265
DEDUCTIONS		
2. Losses incurred (Part 2, Line 35, Column 7)	2,264,428	1,388,343
3. Loss adjustment expenses incurred (Part 3, Line 25, Column 1)	1,375,822	1,395,221
4. Other underwriting expenses incurred (Part 3, Line 25, Column 2)	1,535,457	1,519,789
5. Aggregate write-ins for underwriting deductions		
6. Total underwriting deductions (Line 2 through Line 5)	5,175,707	4,303,353
7. Net income of protected cells		
8. Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7)	(748,750)	(113,088)
INVESTMENT INCOME		
9. Net investment income earned (Exhibit of Net Investment Income, Line 17)	784,543	848,066
10. Net realized capital gains (losses) less capital gains tax of \$ 106,600 (Exhibit of Capital Gains (Losses))	201,836	337,721
11. Net investment gain (loss) (Line 9 plus Line 10)	986,379	1,185,787
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		
14. Aggregate write-ins for miscellaneous income		
15. Total other income (Line 12 through Line 14)		
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)	237,629	1,072,699
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)	237,629	1,072,699
19. Federal and foreign income taxes incurred	(35,148)	95,105
20. Net income (Line 18 minus Line 19) (to Line 22)	272,777	977,594
CAPITAL AND SURPLUS ACCOUNT		
21. Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2)	25,033,224	25,150,188
22. Net income (from Line 20)	272,777	977,594
23. Net transfers (to) from Protected Cell accounts		
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$	(167,599)	77,596
25. Change in net unrealized foreign exchange capital gain (loss)		
26. Change in net deferred income tax	72,910	(241,825)
27. Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Column 3)	(451,629)	(40,329)
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	(977,000)	(890,000)
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		
38. Change in surplus as regards policyholders for the year (Line 22 through Line 37)	(1,250,541)	(116,964)
39. Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37)	23,782,683	25,033,224
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. MISCELLANEOUS INCOME/LOSS		
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.		
3702.		
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)		

CASH FLOW

	1	2
	Current Year	Prior Year
Cash from Operations		
1. Premiums collected net of reinsurance	4,561,593	4,012,804
2. Net investment income	744,076	783,732
3. Miscellaneous income		
4. Total (Line 1 through Line 3)	5,305,669	4,796,536
5. Benefit and loss related payments	1,891,057	1,459,797
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	2,982,102	
7. Commissions, expenses paid and aggregate write-ins for deductions	415,212	2,958,061
8. Dividends paid to policyholders		
9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses)		457,929
10. Total (Line 5 through Line 9)	5,288,371	4,875,787
11. Net cash from operations (Line 4 minus Line 10)	17,298	(79,251)
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds	6,583,803	3,751,366
12.2 Stocks	1,398,203	1,803,010
12.3 Mortgage loans		
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		
12.8 Total investment proceeds (Line 12.1 through Line 12.7)	7,982,006	5,554,376
13. Cost of investments acquired (long-term only):		
13.1 Bonds	8,559,450	5,018,117
13.2 Stocks	432,912	612,932
13.3 Mortgage loans		
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)	8,992,362	5,631,049
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)	(1,010,356)	(76,673)
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	977,000	890,000
16.6 Other cash provided (applied)	(16,558)	(318,732)
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	(993,558)	(1,208,732)
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)	(1,986,616)	(1,364,656)
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of period	3,777,502	5,142,158
19.2 End of year (Line 18 plus Line 19.1)	1,790,886	3,777,502

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		

CASH FLOW, Line 20 (Continued)

OVERFLOW FOR Page 5, Cash Flow

Line Number		1	2
	Details of Write-ins	Current Year	Prior Year

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				
2. Allied lines				
3. Farmowners multiple peril				
4. Homeowners multiple peril				
5. Commercial multiple peril				
6. Mortgage guaranty				
8. Ocean marine				
9. Inland marine				
10. Financial guaranty				
11.1 Medical professional liability - occurrence				
11.2 Medical professional liability - claims-made				
12. Earthquake				
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	65,816			65,816
17.2 Other liability - claims-made	4,542,216	1,970,082	2,151,156	4,361,142
17.3 Excess Workers' Compensation				
18.1 Products liability - occurrence				
18.2 Products liability - claims-made				
19.1, 19.2 Private passenger auto liability				
19.3, 19.4 Commercial auto liability				
21. Auto physical damage				
22. Aircraft (all perils)				
23. Fidelity				
24. Surety				
26. Burglary and theft				
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	4,608,032	1,970,082	2,151,156	4,426,958
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)				

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1A-RECAPITULATION OF ALL PREMIUMS

Line of Business		1	2	3	4	5
		Amount Unearned (Running One Year or Less from Date of Policy) (a)	Amount Unearned (Running More Than One Year from Date of Policy) (a)	Earned but Unbilled Premium	Reserve for Rate Credits and Retrospective Adjustments Based on Experience	Total Reserve for Unearned Premiums Columns 1 + 2 + 3 + 4
1.	Fire					
2.	Allied lines					
3.	Farmowners multiple peril					
4.	Homeowners multiple peril					
5.	Commercial multiple peril					
6.	Mortgage guaranty					
8.	Ocean marine					
9.	Inland marine					
10.	Financial guaranty					
11.1	Medical professional liability - occurrence					
11.2	Medical professional liability - claims-made					
12.	Earthquake					
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					
17.2	Other liability - claims-made	2,151,156				2,151,156
17.3	Excess Workers' Compensation					
18.1	Products liability - occurrence					
18.2	Products liability - claims-made					
19.1, 19.2	Private passenger auto liability					
19.3, 19.4	Commercial auto liability					
21.	Auto physical damage					
22.	Aircraft (all perils)					
23.	Fidelity					
24.	Surety					
26.	Burglary and theft					
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	2,151,156				2,151,156
36.	Accrued retrospective premiums based on experience					
37.	Earned but unbilled premiums					
38.	Balance (Sum of Line 35 through Line 37)					2,151,156
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.
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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						
2. Allied lines						
3. Farmowners multiple peril						
4. Homeowners multiple peril						
5. Commercial multiple peril						
6. Mortgage guaranty						
8. Ocean marine						
9. Inland marine						
10. Financial guaranty						
11.1 Medical professional liability - occurrence						
11.2 Medical professional liability - claims-made						
12. Earthquake						
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	90,159				24,343	65,816
17.2 Other liability - claims-made	5,977,237				1,435,021	4,542,216
17.3 Excess Workers' Compensation						
18.1 Products liability - occurrence						
18.2 Products liability - claims-made						
19.1, 19.2 Private passenger auto liability						
19.3, 19.4 Commercial auto liability						
21. Auto physical damage						
22. Aircraft (all perils)						
23. Fidelity						
24. Surety						
26. Burglary and theft						
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	6,067,396				1,459,364	4,608,032
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 \$

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								
2. Allied lines								
3. Farmowners multiple peril								
4. Homeowners multiple peril								
5. Commercial multiple peril								
6. Mortgage guaranty								
8. Ocean marine								
9. Inland marine								
10. Financial guaranty								
11.1 Medical professional liability - occurrence								
11.2 Medical professional liability - claims-made								
12. Earthquake								
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	4,800			4,800	220,000	60,000	164,800	250.4
17.2 Other liability - claims-made	2,060,377		175,069	1,885,308	5,174,851	4,959,481	2,100,678	48.2
17.3 Excess Workers' Compensation								
18.1 Products liability - occurrence								
18.2 Products liability - claims-made								
19.1, 19.2 Private passenger auto liability								
19.3, 19.4 Commercial auto liability								
21. Auto physical damage								
22. Aircraft (all perils)								
23. Fidelity								
24. Surety								
26. Burglary and theft								
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	2,065,177		175,069	1,890,108	5,394,851	5,019,481	2,265,478	51.2
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)								

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE OHIO BAR LIAB INS CO

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

Line of Business	Reported Losses				Incurred But Not Reported			8	9
	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	Net Losses Unpaid (Columns 4 plus 5 plus 6 minus 7)	Net Unpaid Loss Adjustment Expenses
1. Fire									
2. Allied lines									
3. Farmowners multiple peril									
4. Homeowners multiple peril									
5. Commercial multiple peril									
6. Mortgage guaranty									
8. Ocean marine									
9. Inland marine									
10. Financial guaranty									
11.1 Medical professional liability - occurrence									
11.2 Medical professional liability - claims-made									
12. Earthquake									
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	220,000			220,000				220,000	59,000
17.2 Other liability - claims-made	5,444,884		710,033	4,734,851	440,000			5,174,851	1,666,134
17.3 Excess Workers' Compensation									
18.1 Products liability - occurrence									
18.2 Products liability - claims-made									
19.1, 19.2 Private passenger auto liability									
19.3, 19.4 Commercial auto liability									
21. Auto physical damage									
22. Aircraft (all perils)									
23. Fidelity									
24. Surety									
26. Burglary and theft									
27. Boiler and machinery									
28. Credit									
29. International									
30. Warranty									
31. Reinsurance- Nonproportional Assumed Property	XXX				XXX				
32. Reinsurance- Nonproportional Assumed Liability	XXX				XXX				
33. Reinsurance- Nonproportional Assumed Financial Lines	XXX				XXX				
34. Aggregate write-ins for other lines of business									
35. TOTALS	5,664,884		710,033	4,954,851	440,000			5,394,851	1,725,134
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	1,131,873			1,131,873
1.2 Reinsurance assumed				
1.3 Reinsurance ceded	111,087			111,087
1.4 Net claim adjustment services (Line 1.1 plus Line 1.2 minus Line 1.3)	1,020,786			1,020,786
2. Commission and brokerage:				
2.1 Direct excluding contingent				
2.2 Reinsurance assumed excluding contingent				
2.3 Reinsurance ceded excluding contingent		318,913		318,913
2.4 Contingent - direct				
2.5 Contingent - reinsurance assumed				
2.6 Contingent - reinsurance ceded				
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)		(318,913)		(318,913)
3. Allowances to manager and agents				
4. Advertising		28,479		28,479
5. Boards, bureaus and associations		7,613		7,613
6. Surveys and underwriting reports				
7. Audit of assureds' records				
8. Salary and related items:				
8.1 Salaries	220,682	533,421	112,682	866,785
8.2 Payroll taxes	16,625	31,348	7,168	55,141
9. Employee relations and welfare	48,115	80,934	19,283	148,332
10. Insurance	12,302	41,213	7,996	61,511
11. Directors' fees		91,962	13,741	105,703
12. Travel and travel items	13,531	8,694	3,321	25,546
13. Rent and rent items	22,160	73,797	14,338	110,295
14. Equipment	1,461	16,461	2,678	20,600
15. Cost or depreciation of EDP equipment and software		26,423	3,948	30,371
16. Printing and stationery	3,352	11,229	2,179	16,760
17. Postage, telephone and telegraph, exchange and express	2,675	32,224	5,215	40,114
18. Legal and auditing		104,428	15,604	120,032
19. Totals (Line 3 through Line 18)	340,903	1,088,226	208,153	1,637,282
20. Taxes, licenses and fees:				
20.1 State and local insurance taxes deducting guaranty association credits of \$				
20.2 Insurance department licenses and fees		6,860		6,860
20.3 Gross guaranty association assessments				
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)		6,860		6,860
21. Real estate expenses				
22. Real estate taxes				
23. Reimbursements by uninsured plans				
24. Aggregate write-ins for miscellaneous expenses	14,132	755,587	130,425	900,144
25. Total expenses incurred	1,375,821	1,531,760	338,578	(a) 3,246,159
26. Less unpaid expenses - current year	1,726,132	15,560		1,741,692
27. Add unpaid expenses - prior year	1,798,982	22,423		1,821,405
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)	1,448,671	1,538,623	338,578	3,325,872
DETAILS OF WRITE-INS				
2401. Miscellaneous	14,132	705,587	130,425	850,144
2402. Charitable Contribution		50,000		50,000
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)	14,132	755,587	130,425	900,144

(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) 111,368	118,859
1.1	Bonds exempt from U. S. tax	(a) 78,602	79,229
1.2	Other bonds (unaffiliated)	(a) 820,290	825,541
1.3	Bonds of affiliates	(a)	
2.1	Preferred stocks (unaffiliated)	(b) 43,750	35,468
2.11	Preferred stocks of affiliates	(b)	
2.2	Common stocks (unaffiliated)	62,604	62,213
2.21	Common stocks of affiliates	1,704	698
3.	Mortgage loans	(c)	
4.	Real estate	(d)	
5.	Contract loans		
6.	Cash, cash equivalents and short-term investments	(e) 6,836	
7.	Derivative instruments	(f)	
8.	Other invested assets		
9.	Aggregate write-ins for investment income		
10.	Total gross investment income	1,125,154	1,122,008
11.	Investment expenses		(g) 337,465
12.	Investment taxes, licenses and fees, excluding federal income taxes		(g)
13.	Interest expense		(h)
14.	Depreciation on real estate and other invested assets		(i)
15.	Aggregate write-ins for deductions from investment income		
16.	Total deductions (Line 11 through Line 15)		337,465
17.	Net investment income (Line 10 minus Line 16)		784,543
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 \$ 57,502 accrual of discount less \$ 75,494 amortization of premium and less \$ 31,294 paid for accrued interest on purchases.		(f) Includes \$ accrual of discount less \$ amortization of premium.	
(b) Includes \$ accrual of discount less \$ amortization of premium and less \$ (210) paid for accrued dividends on purchases.		(g) Includes \$ investment expenses and \$ investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.	
(c) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.		(h) Includes \$ interest on surplus notes and \$ interest on capital notes.	
(d) Includes \$ for company's occupancy of its own buildings; and excludes \$ interest on encumbrances.		(i) Includes \$ depreciation on real estate and \$ depreciation on other invested assets.	
(e) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.			

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			61,715	
1.1	Bonds exempt from U. S. tax	25,509	25,509		
1.2	Other bonds (unaffiliated)	275,155	275,155	(25,606)	
1.3	Bonds of affiliates				
2.1	Preferred stocks (unaffiliated)	(23,721)	(23,931)		
2.11	Preferred stocks of affiliates				
2.2	Common stocks (unaffiliated)	32,672	32,672	(104,766)	
2.21	Common stocks of affiliates	(1,729)	(1,729)	(98,732)	
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)	307,886	(210)	(167,389)	
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)				

EXHIBIT OF NONADMITTED ASSETS

	1	2	3
	Current Year Total Nonadmitted Assets	Prior Year Total Nonadmitted Assets	Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D)			
2. Stocks (Schedule D):			
2.1 Preferred stocks			
2.2 Common stocks			
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens			
3.2 Other than first liens			
4. Real estate (Schedule A):			
4.1 Properties occupied by the company			
4.2 Properties held for the production of income			
4.3 Properties held for sale			
5. Cash (Schedule E-Part 1) , cash equivalents (Schedule E-Part 2) and short-term investments (Schedule DA)			
6. Contract loans			
7. Derivatives (Schedule DB)			
8. Other invested assets (Schedule BA)			
9. Receivable for securities			
10. Securities lending reinvested collateral assets (Schedule DL)			
11. Aggregate write-ins for invested assets			
12. Subtotals, cash and invested assets (Line 1 to Line 11)			
13. Title plants (for Title insurers only)			
14. Investment income due and accrued			
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection			
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due			
15.3 Accrued retrospective premiums			
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers			
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	157,134	14,589	(142,545)
18.2 Net deferred tax asset	131,227	76,775	(54,452)
19. Guaranty funds receivable or on deposit			
20. Electronic data processing equipment and software			
21. Furniture and equipment, including health care delivery assets	1,946,880	1,692,247	(254,633)
22. Net adjustment in assets and liabilities due to foreign exchange rates			
23. Receivable from parent, subsidiaries and affiliates			
24. Health care and other amounts receivable			
25. Aggregate write-ins for other than invested assets			
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Line 12 to Line 25)	2,235,241	1,783,611	(451,630)
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			
28. Total (Line 26 and Line 27)	2,235,241	1,783,611	(451,630)
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.			
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)			

Note 1: Summary of Significant Accounting Policies

A. Accounting Practices

The Company's statutory financial statements are presented on the basis of accounting practices prescribed or permitted by the Insurance Department of the State of Ohio.

The State of Ohio requires insurance companies domiciled in the state of Ohio to prepare statutory financial statements in accordance with the National Association of Insurance Commissioners (NAIC) Accounting Practices and Procedures Manual. There are no differences between Ohio prescribed practices and NAIC statutory accounting practices (NAIC SAP) as reflected below. The Company's 1A Electronic Financial Statement Note contains these values as of 12/31/11.

1A01 State Prescribed Net Income	272,777
1A04 NAIC SAP Net Income	272,777
1A05 State Prescribed Policy Holder Surplus	23,782,683
1A08 NAIC SAP Policyholder Surplus	23,782,683

B. Use of Estimates

The preparation of financial statements in accordance with statutory accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from these estimates.

C. Accounting Policies

Premium and Related Commissions

Premiums are earned over the terms of the related insurance policies and reinsurance contracts. Unearned premium reserves are established to cover the unexpired portion of premiums written. Such reserves are computed by pro rata methods for direct business and are based on reports received from ceding companies for reinsurance.

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 amortized cost, which approximates fair value.
- (2) Bonds not backed by other loans are stated at amortized cost.
- (3) Common stocks, other than investments of subsidiaries and affiliates, are stated at market.
- (4) Preferred stock. Redeemable preferred stocks are stated at cost.
- (5) Mortgage loans. None.
- (6) Loan-backed securities. None.
- (7) The company carries the non-insurance subsidiary (1650 Lake Shore Inc) in which the company has an interest of 100%, on the equity basis.
- (8) Joint ventures. None.
- (9) Derivatives. None.
- (10) Investment income consists primarily of interest and dividends. Interest is recognized on an accrual basis and dividends are recorded as earned at the ex-dividend date.

(11) Unpaid Losses and Loss Expenses

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

NOTES TO FINANCIAL STATEMENTS

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.

(12) Capitalization Policy Change - None

Note 2: Accounting Changes and Correction of Errors

A. Accounting changes other than Codification and correction of errors. None

Note 3 Business Combinations and Goodwill

A, B, C . Not Applicable.

Note 4 Discontinued Operations

A. 1, 2, 3, 4, 5. Not Applicable.

Note 5 Investments

- A. Mortgage Loans. Not Applicable
- B. Debt Restructuring. Not Applicable
- C. Reverse Mortgage. Not Applicable

- D. Loan-Backed Securities. Not Applicable

- E. Repurchase Agreements. Not Applicable
- F. Real Estate. Not Applicable
- G. Low income housing tax credits. Not Applicable

Note 6 Joint Ventures, Partnerships and Limited Liability Companies.

A, B. Not Applicable.

Note 7 Investment Income

- (A) The company does not admit investment income due and accrued if amounts are over 90 days past due.
- (B) Amounts nonadmitted. Not Applicable.

Note 8 Derivative Instruments

Not Applicable.

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE OHIO BAR LIAB INS CO

NOTES TO FINANCIAL STATEMENTS

Note 9 Income Taxes

Note 9 - Income Taxes

		2011			2010			Change		
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
				(col 1 + 2)			(col 4 + 5)	(col 1 - 4)	(col 2 - 5)	(col 7 + 8)
		Ordinary	Capital	Total	Ordinary	Capital	Total	Ordinary	Capital	Total
A. The components of the net deferred tax asset/(liability) are as follows:										
1										
(a)	Gross Deferred Tax assets Statutory valuation allowance	579,007		579,007	545,824		545,824	33,183		33,183
(b)	statutory valuation allowance									
(c)	Adjusted gross deferred tax assets (1a-1b)	579,007		579,007	545,824		545,824	33,183		33,183
(d)	Deferred tax liabilities		67,075	67,075	-	108,908	108,908		(41,833)	(41,833)
(e)	Subtotal (net deferred tax assets) (1c-1d)	579,007	(67,075)	511,933	545,824	(108,908)	436,916	33,183	41,833	75,017
(f)	Deferred tax assets non-admitted	131,228	-	131,228	74,668		74,668	56,560		56,560
(g)	Net admitted deferred tax assets(1e-1f)	447,779	(67,075)	380,705	471,156	(108,908)	362,248	(23,376)	41,833	18,457
4										
Admission Calculation Components - SSAP 10R, paragraphs 10.a., 10.b., and 10.c.										
(a)	Paragraph 10a	380,705	-	380,705	362,247	-	362,247	18,458	-	18,458
(b)	Paragraph 10b (the lesser paragraph of 10b.i and 10b.ii below	-	-	-	-	-	-	-	-	-
(c)	Paragraph 10b.i	-	-	-	-	-	-	-	-	-
(d)	Paragraph 10.b.ii	xxx	xxx	2,316,845	xxx	xxx	2,513,317	xxx	xxx	(196,472))
(e)	Paragraph 10.c	67,075		67,075	108,908		108,908	(41,833)	-	(41,833)
(f)	Total (4a+4b+4e)	447,780	-	447,780	471,155	-	471,155	(23,375)	-	(23,375)
Admission Calculation Components - SSAP 10R, paragraphs 10.e.										
(g)	Paragraph 10.e.i	380,705	-	380,705	362,247	-	362,247	18,458	-	18,458
(h)	Paragraph 10e.ii (the lesser paragraph of 10e.ii.a and 10e.ii.b below)		-	-	-		-	-	-	
(i)	Paragraph 10.e.ii.a	-	-	-	-	-	-	-	-	-
(j)	Paragraph 10.e.ii.b	xxx	xxx	3,475,268	xxx	xxx	3,769,975	xxx	xxx	(294,707)
(k)	Paragraph 10.e.iii	67,075	-	67,075	108,908	-	108,908	(41,833)	-	(41,833)

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE OHIO BAR LIAB INS CO

NOTES TO FINANCIAL STATEMENTS

(l)	Total (4g+4h+4k)	447,780	-	447,780	471,155	-	471,155	(23,375)	-	(23,375)
		2011			2010			Change		
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
		(col 1 + 2)			(col 4 + 5)			(col 1 - 4)	(col 2 - 5)	(col 7 + 8)
		Ordinary	Capital	Total	Ordinary	Capital	Total	Ordinary	Capital	Total
Used in SSAP 10R, Paragraph 10.d.										
(m)	Total adjusted capital	xxx	xxx	23,782,683	xxx	xxx	25,133,169	xxx	xxx	(1,964,716)
(n)	Authorized control level	xxx	xxx	1,458,867	xxx	xxx	1,196,185	xxx	xxx	(1,196,185)
5										
SSAP 10R, Paragraphs 10.a., 10.b. and 10.c.										
(a)	Admitted deferred tax assets	447,779	(67,075)	380,705	471,156	(108,908)	362,248	(23,376)	41,833	18,457
(b)	Admitted assets	xxx	xxx	33,422,010	xxx	xxx	34,258,513	xxx	xxx	(836,503)
(c)	Adjusted Statutory Surplus	xxx	xxx	22,787,748	xxx	xxx	24,670,921	xxx	xxx	(1,883,173))
(d)	DTA's	xxx	xxx	380,705	xxx	xxx	362,248	xxx	xxx	18,457
Increase due to SSAP 10R, paragraph 10.e.										
(e)	Admitted deferred tax assets	-	-	-	-	-	-	-	-	-
(f)	Admitted assets	-	-	-	-	-	-	-	-	-
(g)	Statutory surplus	-	-	-	-	-	-	-	-	-

2. The Company has not elected to admit additional DTA's pursuarnt to SSAP 10 R, paragraph 10 (e). The current period election does not differ from the prior reporting period.
3. Not applicable
4. See table above
5. There is no impact of Tax Planning Strategies on Adjusted Gross DTA's and Net Admitted Adjusted Gross DTA's in 2011 or 2010.

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE OHIO BAR LIAB INS CO

NOTES TO FINANCIAL STATEMENTS

B. Not Applicable.

C. Current and deferred income taxes consist of the following components

1. Current Income Tax:

	(1) 2011	(2) 2010	(3) Change
(a) Federal	(35,148)	95,105	(130,253)
(b) Foreign	-	-	-
(c) Subtotal	(35,148)	95,105	(130,253)
(d) Federal income tax on net capital gains	104,044	12,181	91,863
(e) Utilization of capital loss carry-forwards			
(f) Other			
(g) Federal and Foreign income taxes incurred	68,896	107,286	(38,390)

2. Deferred Tax Asset:

	(1) 2011	(2) 2010	(3) Change
(a) Ordinary:			
(1) Loss and loss adjustment expense reserves	290,019	272,885	17,134
(2) Write down of common stocks to market value			-
(3) Unearned premium reserves	146,279	133,966	12,313
(4) Capital loss carry forward		-	-
(5) Accrued expenses and other	142,710	138,973	3,737
	-	-	-
Subtotal	579,008	545,824	33,184
(b) Statutory valuation allowance adjustment	-	-	-
(c) Non-admitted	(131,228)	(74,688)	(56,540)
(d) Admitted ordinary tax asset	447,779	471,136	(23,357)
(e) Capital			
(1) Net-capital Loss carryforward	-		
Subtotal	-		
(f) Statutory valuation allowance adjustment	-	-	-
(g) Nonadmitted	-		
(h) Admitted capital deferred tax asset	-	-	-
(i) Admitted deferred tax assets	447,779	471,136	(23,357)

3. Deferred Tax Liabilities

	(1) 2 011	(2) 2010	(3) Change
(b) Capital			
(1) Unrealized Gain/Loss on investments	(67,075)	(108,908)	41,833
		-	
(c) Deferred tax liabilities	(67,075)	(108,908)	41,833

Among the more significant book to tax adjustments were the following:

E. (1) At 12/31/2011, the company did not have any unused operating loss carry forwards available to offset against future taxable income.

(2) The following are income taxes for 2011 and 2010 that is available for recoupment in the event of future for net losses:

2011	\$ 68,896
2010	\$157,537

(3) The Company did not have any protected tax deposits under Section 6603 of the Internal Revenue Code.

Note 10 Information concerning Parent, Subsidiaries and affiliates

- A. The company pays monthly market value rent to its affiliated subsidiary.
- B. The Board of Directors of the company, at the 05/18/11 board meeting, approved a dividend of \$500,000. The Company made the dividend payment to its one stockholder, The Ohio State Bar Association, on 6/15/11 in the amount of \$500,000. The Board of Directors of the Company, at the 09/22/11 board meeting, approved a dividend payable to the stockholder on 10/14/11 in the amount of \$477,000. The dividend payable was approved by the Ohio Department of Insurance.
- C. **None**

NOTES TO FINANCIAL STATEMENTS

D, E, F, G, H, J, K. N/A

I. The company owns 100% interest in 1650 Lake Shore, Inc., A Non-Insurance Company, whose carrying value is equal to or exceeds 10% of the admitted assets of the Company. At December 31, 2011, the company carries 1650 Lake Shore Inc., A Non Insurance Company at equity-adjusted balance of \$1,790,180.

Note 11 Debt

A . Not Applicable.

Note 12 Retirement Plans, Deferred Compensation, Post employment Benefits and Compensated Absences and Other Postretirement Benefit Plans

A. Not applicable.

B. The Company's employees are covered by a qualified defined contribution plan sponsored by the Company. Contributions of 10% of each employee's compensation are made each year. The Company's contribution for the plan was \$63,281 and \$94,706 for 2011 and 2010 respectively. The funds were paid in full annually by the Company and placed with John Hancock (effective June, 2005) for investing in vehicles of the employee's choice. Prior to John Hancock, the company used Manulife Financial for investing the contributions.

There is a 401K plan that only the Employee makes contributions. The 401K plan is also managed by John Hancock.

C, D, E, F. Not Applicable.

Note 13 Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations

A. Outstanding shares.
The Company has 10,000 shares of \$200 par value common stock authorized and 5000 shares issued and outstanding. The company has no preferred stock authorized, issued or outstanding.

B. Dividend Rate of Preferred - Not applicable

C. D. E. & F. Dividend Restrictions - Not applicable

G. Mutual Surplus Advances - Not Applicable

H. Company Stock Held for Special Purposes - Not Applicable

I. Changes in Special Surplus Funds - Not Applicable

J. Changes in Unassigned Funds	<u>Description</u>	<u>Cumulative Increase (Decrease)</u>
		<u>In Surplus</u>
	1. Unrealized Gain	\$(167,599)

The unrealized gain is not net of the applicable deferred tax of \$67,075.

K. Surplus Notes - Not Applicable

L & M Quasi Reorganizations - Not Applicable

N. Dividend Payments

NOTES TO FINANCIAL STATEMENTS

The Company made a dividend payment to its one stockholder, The Ohio State Bar Association, on 5/18/11 in the amount of \$500,000. The Board of Directors of the Company, at the 09/22/10 board meeting, approved a dividend payable to the stockholder on 10/14/11 in the amount of \$477,000. The dividend payable was approved by the Ohio Department of Insurance.

Note 14 Commitments and Contingencies

- A.** The Company has no commitments or contingent commitments to affiliates or other entities.
- B.** The Company is subject to guaranty fund and other assessments by the state in which it writes business.
- C.** **Gain contingencies. Not Applicable.**
- D.** **All other contingencies.**
Various lawsuits have arisen in the ordinary course of the Company's business. The Company believes that its defenses are meritorious and the eventual outcome of those lawsuits will not have a material effect on the Company's financial position. [Contingent liabilities arising from litigation, income taxes and other matters are not considered material in relation to the financial position of the Company.]

Note 15 Leases

- A. Lessee Leasing Arrangements**
 - 1. The Company leases office space.
 - 2. The Company is not involved in non-cancelable lease terms.
 - 3. The Company has not entered into any sales and leaseback arrangements.
- B. Lessor Leasing Arrangements**
 - 1. Operating Leases. Not Applicable.
 - 2. Leveraged Leases. Not Applicable.

Note 16 Information About Financial Instruments with Off-balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk

- A.** The company does not carry financial instruments with Off-balance Sheet Risks or concentration of credit risk.

Note 17 Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

- A.** **Transfer of Receivables reported as Sales. Not Applicable.**
- B.** **Transfer and Servicing of Financial Assets. Not Applicable.**
Wash Sales. Not Applicable.

Note 18 Gain or Loss to the Reporting Entity from Uninsured A&H Plans and the Uninsured Portion of Partially Insured Plans

- A.** **ASO Plans. Not Applicable.**
- A.** **ASC Plans. Not Applicable.**
- B.** **Medicare or Similarly Structured Cost Based Reimbursement Contract. Not Applicable.**

Note 19 Direct Premiums Written/Produced by Managing General Agents/Third Party Administrators.

The Company does not use Managing General Agents/Third Party Administrators.

Note 20 - Fair Value Measurements

A.					
(1)	Assets Measured at Fair Value on a Recurring Basis				
	(1)	(2)	(3)	(4)	(5)
	Description	(Level 1)	(Level 2)	(Level 3)	Total
(a)	Assets at Fair Value				
	Preferred Stock				
		-			-
	Common Stock				
		6,116,189			6,116,189
	Total Assets at Fair Value				
		6,116,189			6,116,189
(b)	Liabilities at Fair Value				
	NONE				
(2)	Not Applicable				
B.	Not Applicable				

Note 21 Other Items

- A. Extraordinary Items. Not Applicable.
- B. Troubled Debt Restructuring Debtors. Not Applicable.
- C. Other Disclosures. Not Applicable.
- D. Uncollectible Premiums Receivable. Not Applicable.
- E. Business Interruptions Insurance Recoveries. Not Applicable.
- F. State Transferable Tax Credits. Not Applicable.
- G. Hybrid Securities. Not Applicable.
- H. Subprime Mortgage Related Risk Exposures. Not Applicable.

Note 22 Events Subsequent

There were no events occurring subsequent to December 31, 2011, through the date of this filing, meriting disclosure.

Note 23 Reinsurance

- A. Unsecured Reinsurance Recoverables. None.
- B. Reinsurance Recoverables in Dispute. None.
- C. Reinsurance Assumed and Ceded.

1.		Assumed Reinsurance Prem.		Ceded Reinsurance Prem.		Net Reinsurance Prem.	
		Reserve	Comm.	Reserve	Comm.	Reserve	Comm.
a.	Affiliates	\$N/A	\$N/A	\$N/A	\$N/A	\$	\$
b.	All others	\$	\$	\$598,391	\$122,670	\$598,391	\$122,670
c.	Total	\$N/A	\$N/A	\$598,391	\$122,670	\$598,331	\$122,670
d.							
Direct Unearned Premium Reserve				\$2,749,547			

2. Not Applicable

3. The Company does not use protected cells as an alternative to traditional reinsurance.

- D. Uncollectible Reinsurance. Not Applicable.
- E. Commutation of Ceded Reinsurance. Not Applicable
- F. Retroactive Reinsurance. Not Applicable.
- G. Reinsurance Accounted for as a Deposit. Not Applicable.

Note 24 Retrospectively Rated Contracts and Contracts Subject to Redetermination. Not Applicable.

Note 25 Change in Incurred Losses and Loss Adjustment Expenses

The estimated cost of losses and loss adjustment expenses (LAE) attributable to insured events of prior years has increased by \$14 during 2011, (000's omitted) as a result of reestimation of unpaid losses and loss adjustment expenses. Original estimates are increased or decreased as additional information becomes known regarding individual claims.

Note 26 Intercompany Pooling Arrangements. Not Applicable.

Note 27 Structured Settlements. Not Applicable.

Note 28 Health Care Receivables. Not Applicable.

Note 29 Participating Accident & Health Policies. Not Applicable

Note 30 Premium Deficiency Reserves.

NOTES TO FINANCIAL STATEMENTS

1. Liability carried for premium deficiency reserves. None
2. Date of the most recent evaluation of this liability. March 02, 2011
3. Was anticipated investment income utilized in the calculation? No

Note 31 High Deductibles. Not Applicable.

Note 32 Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses. Not Applicable.

Note 33 Asbestos/Environmental Reserves. Not Applicable.

Note 34 Subscriber Savings Accounts. Not Applicable.

Note 35 Multiple Peril Crop. Not Applicable.

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 (X) No ()
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 (X) No () N/A ()
1.3	State Regulating?	Ohio
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.	12/31/2008
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.	12/31/2008
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).	09/15/2009
3.4	By what department or departments? OHIO DEPARTMENT OF INSURANCE	
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)

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES

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 the name of entity, the NAIC company code, and state of domicile 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) 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
-----------------------------	--------------------------------

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 locations (city and state of the main office) of any 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
--------------------------------	--	---------------------	---------------------	---------------------	----------------------	---------------------

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES
GENERAL

9.

What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?
CROWE HORWATH LLP 10 WEST BROAD ST, STE 1700 COLUMBUS, OH 43215
.....

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 related to the other requirements of the Annual Financial Model Reporting Model Regulation as allowed for in Section 17A of the 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 reporting entity established an Audit Committee in compliance with domiciliary state insurance laws?

Yes (X) No () N/A ()

10.6

If the response to 10.5 is no or n/a , 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?
STEVEN J GROESCHEN (FCAS, MAAA) CHIEF CONSULTING ACTUARY AND RISK ANALYST, DEMOTECH, INC. 2715 TULLER PARKWAY, DUBLIN OH
.....

12.1

Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly?

Yes (X) No ()

12.11

Name of real estate holding company
1650 LAKE SHORE INC
.....

12.12

Number of parcels involved

..... 1

12.13

Total book/adjusted carrying value

\$ 1,790,180

12.2

If yes, provide explanation
OBLIC OWNS 100%
.....

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 (X)

13.3

Have there been any changes made to any of the trust indentures during the year?

Yes () No (X)

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?
(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.

Yes (X) No ()

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

PART 1 - COMMON INTERROGATORIES

15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance with a NAIC rating of 3 or below? Yes () No (X)

15.2 If the response to 15.1 is yes, indicated the American Bankers Association (ABA) Routing Number and the name of issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.

1 American Bankers Association (ABA) Routing Number	2 Issuing or Confirming Bank Name	3 Circumstances That Can Trigger the Letter of Credit	4 Amount
--	--	--	-----------------

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES

BOARD OF DIRECTORS

16.

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 ()
17.

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 ()
18.

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

19.

Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g. , Generally Accepted Accounting Principles)?

Yes (X) No ()
- 20.1

Total amount loaned during the year (inclusive of Separate Accounts , exclusive of policy loans):

20.11

To directors or other officers

\$

20.12

To stockholders not officers

\$

20.13

Trustees, supreme or grand (Fraternal only)

\$
- 20.2

Total amount of loans outstanding at end of year (inclusive of Separate Accounts , exclusive of policy loans):

20.21

To directors or other officers

\$

20.22

To stockholders not officers

\$

20.23

Trustees, supreme or grand (Fraternal only)

\$
- 21.1

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)
- 21.2

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

21.21

Rented from others

\$

21.22

Borrowed from others

\$

21.23

Leased from others

\$

21.24

Other

\$
- 22.1

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)
- 22.2

If answer is yes:

22.21

Amount paid as losses or risk adjustment

\$

22.22

Amount paid as expenses

\$

22.23

Other amounts paid

\$
- 23.1

Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?

Yes () No (X)
- 23.2

If yes, indicate any amounts receivable from parent included in the Page 2 amount:

\$

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES

INVESTMENT

24.1

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 24.3)

Yes (X) No ()

24.2

If no , give full and complete information relating thereto:
.....
.....

24.3

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)
.....
.....

24.4

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)

24.5

If answer to 24. 4 is YES , report amount of collateral for conforming programs .

\$

24.6

If answer to 24. 4 is NO , report amount of collateral for other programs .

\$

24.7

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)

24.8

Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%?

Yes () No () N/A (X)

24.9

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)

25.1

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 21. 1 and 24.3)

Yes () No (X)

25.2

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

25.21

Subject to repurchase agreements

\$

25.22

Subject to reverse repurchase agreements

\$

25.23

Subject to dollar repurchase agreements

\$

25.24

Subject to reverse dollar repurchase agreements

\$

25.25

Pledged as collateral

\$

25.26

Placed under option agreements

\$

25.27

Letter stock or securities restricted as to sale

\$

25.28

On deposit with state or other regulatory body

\$

25.29

Other

\$

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES
INVESTMENT

25.3 For category (25.27) provide the following:

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

26.1 Does the reporting entity have any hedging transactions reported on Schedule DB?

Yes () No (X)

26.2 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)

27.1 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)

27.2 If yes, state the amount thereof at December 31 of the current year.

\$

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES
INVESTMENT

28. 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 ()

28.01 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
---------------------------	--------------------------

[illegible]

28.02 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)
--------------	------------------	------------------------------

28.03 Have there been any changes, including name changes, in the custodian(s) identified in 28.01 during the current year?

Yes () No (X)

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

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

28.05 Identify all investment advisors, broker/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
--	-----------	--------------

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE OHIO BAR LIAB INS CO

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

[illegible]

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES
INVESTMENT

29.1 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)

29.2 If yes, complete the following schedule:

¹ CUSIP Number	² Name of Mutual Fund	³ Book/Adjusted Carrying Value
------------------------------	-------------------------------------	--

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

¹ Name of Mutual Fund (from question 29.2)	² Name of Significant Holding of the Mutual Fund	³ Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to the Holding	⁴ Date of Valuation
---	---	--	-----------------------------------

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES
INVESTMENT

30. 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 (+)
30.1 Bonds	\$ 24,606,645	\$ 27,142,979	\$ 2,536,334
30.2 Preferred stocks	\$	\$	\$
30.3 Totals	\$ 24,606,645	\$ 27,142,979	\$ 2,536,334

30.4 Describe the sources or methods utilized in determining the fair values:
INTERACTIVE DATA & REFERENCE DATA INC
.....

31.1 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)

31.2 If the answer to 31.1 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)

31.3 If the answer to 31.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:
INTERACTIVE DATA & REFERENCE DATA INC
.....

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

32.2 If no, list exceptions:
.....
.....

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES
OTHER

33.1 Amount of payments to Trade Associations , service organizations and statistical or Rating Bureaus , if any? \$ 11,830

33.2 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
NAMIC	\$ 5,053
.....	\$
.....	\$
.....	\$

34.1 Amount of payments for legal expenses, if any? \$ 316

34.2 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
.....	\$
.....	\$
.....	\$
.....	\$

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

35.2 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 (X)

5.5

If yes, give full information.

.....
.....

16

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?

N/A

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:

N/A

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?

N/A

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 () No (X)

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 uninsured 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 31 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,
(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,
(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)
Yes () No (X)
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):

\$

950,000

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.

1

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:

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	2	3	4	5
	Direct Losses Incurred	Direct Losses Unpaid	Direct Written Premium	Direct Premium Unearned	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)

Incurred 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 2011	2 2010	3 2009	4 2008	5 2007
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)	6,067,396	5,841,239	5,825,142	5,625,047	5,659,849
2. Property lines (Lines 1, 2, 9, 12, 21 and 26)					
3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 and 27)					
4. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 and 34)					
5. Nonproportional reinsurance lines (Lines 31, 32 and 33)					
6. Total (Line 35)	6,067,396	5,841,239	5,825,142	5,625,047	5,659,849
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)	4,608,032	4,286,712	4,273,266	4,156,259	4,097,833
8. Property lines (Lines 1, 2, 9, 12, 21 and 26)					
9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 and 27)					
10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 and 34)					
11. Nonproportional reinsurance lines (Line 31, 32 and 33)					
12. Total (Line 35)	4,608,032	4,286,712	4,273,266	4,156,259	4,097,833
Statement of Income (Page 4)					
13. Net underwriting gain (loss) (Line 8)	(748,750)	(113,088)	579,743	487,378	105,749
14. Net investment gain (loss) (Line 11)	986,379	1,185,787	701,181	1,084,594	1,431,399
15. Total other income (Line 15)					5,236
16. Dividends to policyholders (Line 17)					
17. Federal and foreign income taxes incurred (Line 19)	(35,148)	95,105	390,343	687,211	494,969
18. Net income (Line 20)	272,777	977,594	890,581	884,761	1,047,415
Balance Sheet Lines (Pages 2 and 3)					
19. Total admitted assets excluding protected cell business (Page 2, Line 26, Column 3)	33,895,370	34,620,271	35,319,633	35,885,143	38,442,615
20. Premiums and considerations (Page 2, Column 3)					
20.1 In course of collection (Line 15.1)	467,783	375,700	420,661	407,284	389,940
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)	10,112,687	9,587,047	10,169,445	10,848,001	11,437,225
22. Losses (Page 3, Line 1)	5,392,851	5,019,481	5,090,933	4,928,979	5,863,918
23. Loss adjustment expenses (Page 3, Line 3)	1,725,134	1,796,698	1,802,791	1,906,940	1,727,669
24. Unearned premiums (Page 3, Line 9)	2,151,156	1,970,082	1,873,635	1,802,940	1,817,984
25. Capital paid up (Page 3, Line 30 and Line 31)	1,000,000	1,000,000	1,000,000	1,000,000	1,000,000
26. Surplus as regards policyholders (Page 3, Line 37)	23,782,683	25,033,224	25,150,188	25,037,142	27,005,390
Cash Flow (Page 5)					
27. Net cash from operations (Line 11)	17,298	(79,251)	1,517,945	506,560	1,905,494
Risk-Based Capital Analysis					
28. Total adjusted capital	23,782,683	25,033,224	25,150,188	25,037,142	27,005,390
29. Authorized control level risk-based capital	1,458,867	1,196,185	1,131,694	1,042,804	1,270,664
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)	75.7	66.9	60.8	59.7	69.8
31. Stocks (Line 2.1 and Line 2.2)	18.8	21.8	24.2	20.4	22.3
32. Mortgage loans on real estate (Line 3.1 and Line 3.2)					
33. Real estate (Lines 4.1, 4.2 and 4.3)					
34. Cash, cash equivalents and short-term investments (Line 5)	5.5	11.3	15.0	19.9	7.9
35. Contact loans (Line 6)					
36. Derivatives (Line 7)			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
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)	1,790,180	1,888,912	2,190,960	2,410,700	2,384,968
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	1,790,180	1,888,912	2,190,960	2,410,700	2,384,968
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)	7.5	7.5	8.7	9.6	8.8

FIVE-YEAR HISTORICAL DATA
(Continued)

	1 2011	2 2010	3 2009	4 2008	5 2007
Capital and Surplus Accounts (Page 4)					
50. Net unrealized capital gains (losses) (Line 24)	(167,599)	77,596	888,409	(1,609,380)	(63,354)
51. Dividends to stockholders (Line 35)	(977,000)	(890,000)	(1,000,000)	(1,000,000)	(2,000,000)
52. Change in surplus as regards policyholders for the year (Line 38)	(1,250,541)	(116,964)	113,046	(1,968,248)	(1,138,942)
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)	2,065,177	1,877,845	1,308,220	2,865,721	1,310,834
54. Property lines (Lines 1, 2, 9, 12, 21 and 26)					
55. Property and liability combined lines (Lines 3, 4, 5, 8, 22 and 27)					
56. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 and 34)					
57. Nonproportional reinsurance lines (Lines 31, 32, and 33)					
58. Total (Line 35)	2,065,177	1,877,845	1,308,220	2,865,721	1,310,834
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)	1,890,108	1,460,747	1,220,874	2,169,329	1,247,476
60. Property lines (Lines 1, 2, 9, 12, 21 and 26)					
61. Property and liability combined lines (Lines 3, 4, 5, 8, 22 and 27)					
62. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 and 34)					
63. Nonproportional reinsurance lines (Lines 31, 32, and 33)					
64. Total (Line 35)	1,890,108	1,460,747	1,220,874	2,169,329	1,247,476
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)	51.2	33.1	32.9	29.6	48.7
67. Loss expenses incurred (Line 3)	31.1	33.3	22.5	29.7	21.4
68. Other underwriting expenses incurred (Line 4)	34.7	36.3	30.8	29.0	27.3
69. Net underwriting gain (loss) (Line 8)	(16.9)	(2.7)	13.8	11.7	2.5
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)	33.3	35.5	30.2	29.1	27.7
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)	82.2	66.4	55.4	59.3	70.1
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)	19.4	17.1	17.0	16.6	15.2
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)	(201)	(415)	(1,565)	(1,014)	(695)
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)	(0.8)	(1.7)	(6.3)	(3.8)	(2.5)
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)	(292)	(1,720)	(2,169)	(1,088)	(1,351)
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)	(1.2)	(6.9)	(8.0)	(3.9)	(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 ()

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE OHIO BAR LIAB INS CO												
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	2	3	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10	11	
	Direct and Assumed	Ceded	Net (Columns 1 - 2)	4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded	Salvage and Subrogation Received	Total Net Paid (Columns 4 - 5 + 6 - 7 + 8 - 9)	
1. Prior	X X X	X X X	X X X									X X X
2. 2002	4,222	937	3,285	2,313	339	632	92	202		144	2,716	X X X
3. 2003	4,570	1,302	3,268	2,351	560	680	92	130		223	2,509	X X X
4. 2004	5,242	1,693	3,549	546		448		141		201	1,135	X X X
5. 2005	5,564	1,641	3,923	1,020	97	690	16	220		32	1,817	X X X
6. 2006	5,645	1,503	4,142	2,255	325	895	83	349		41	3,091	X X X
7. 2007	5,727	1,548	4,179	1,785	306	659	170	320		2	2,288	X X X
8. 2008	5,656	1,485	4,171	1,532	28	998	73	359		10	2,788	X X X
9. 2009	5,709	1,506	4,203	1,160		710		308		12	2,178	X X X
10. 2010	5,831	1,641	4,190	781	225	517	17	180		1	1,236	X X X
11. 2011	5,871	1,444	4,427	473		166		139			778	X X X
12. Totals	X X X	X X X	X X X	14,216	1,880	6,395	543	2,348		666	20,536	X X X

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22	Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding - Direct & Assumed
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1.													X X X
2.	22				23				1		6	46	X X X
3.													X X X
4.													X X X
5.													X X X
6.	39				34				4		1	77	X X X
7.	428	168			63	25			9		10	307	X X X
8.	1,031	336			189	79			23		37	828	X X X
9.	1,327	92	62		275	28	11		35		39	1,590	X X X
10.	1,262	115	86		189	5	41		54		103	1,512	X X X
11.	1,556		292		638		143		131		287	2,760	X X X
12.	5,665	711	440		1,411	137	195		257		483	7,120	X X X

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34	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	Inter - Company Pooling Participation Percentage	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.	3,193	431	2,762	75.6	46.0	84.1				22	24
3.	3,161	652	2,509	69.2	50.1	76.8					
4.	1,135		1,135	21.7		32.0					
5.	1,930	113	1,817	34.7	6.9	46.3					
6.	3,576	408	3,168	63.3	27.1	76.5				39	38
7.	3,264	669	2,595	57.0	43.2	62.1				260	47
8.	4,132	516	3,616	73.1	34.7	86.7				695	133
9.	3,888	120	3,768	68.1	8.0	89.7				1,297	293
10.	3,110	362	2,748	53.3	22.1	65.6				1,233	279
11.	3,538		3,538	60.3		79.9				1,848	912
12.	X X X	X X X	X X X	X X X	X X X	X X X			X X X	5,394	1,726

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 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011	11 One Year	12 Two Year
1. Prior	3,819	3,023	2,719	2,733	2,730	2,633	2,596	2,520	2,427	2,413	(14)	(107)
2. 2002	3,246	3,376	3,100	2,966	2,928	2,916	2,911	2,644	2,598	2,559	(39)	(85)
3. 2003	X X X	3,115	2,797	2,572	2,399	2,423	2,448	2,390	2,382	2,379	(3)	(11)
4. 2004	X X X	X X X	1,453	1,298	1,219	1,108	999	981	976	994	18	13
5. 2005	X X X	X X X	X X X	2,596	2,183	1,736	1,746	1,643	1,610	1,597	(13)	(46)
6. 2006	X X X	X X X	X X X	X X X	3,781	3,714	3,438	3,198	2,910	2,815	(95)	(383)
7. 2007	X X X	X X X	X X X	X X X	X X X	3,327	2,706	2,310	2,343	2,266	(77)	(44)
8. 2008	X X X	X X X	X X X	X X X	X X X	X X X	3,168	2,758	3,043	3,234	191	476
9. 2009	X X X	X X X	X X X	X X X	X X X	X X X	X X X	3,530	3,270	3,425	155	(105)
10. 2010	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	2,838	2,514	(324)	X X X
11. 2011	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	3,268	X X X	X X X
12. Totals											(201)	(292)

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 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
1. Prior	0 0 0	1,510	1,801	1,915	2,152	2,203	2,428	2,447	2,416	2,413	X X X	X X X
2. 2002	460	1,499	2,117	2,422	2,456	2,572	2,572	2,598	2,598	2,514	X X X	X X X
3. 2003	X X X	261	1,233	1,459	1,918	2,083	2,298	2,384	2,386	2,379	X X X	X X X
4. 2004	X X X	X X X	131	616	859	973	994	998	994	994	X X X	X X X
5. 2005	X X X	X X X	X X X	175	825	1,138	1,576	1,601	1,602	1,597	X X X	X X X
6. 2006	X X X	X X X	X X X	X X X	366	1,219	2,327	2,627	2,724	2,742	X X X	X X X
7. 2007	X X X	X X X	X X X	X X X	X X X	300	899	1,237	1,859	1,968	X X X	X X X
8. 2008	X X X	X X X	X X X	X X X	X X X	X X X	310	1,178	1,914	2,429	X X X	X X X
9. 2009	X X X	X X X	X X X	X X X	X X X	X X X	X X X	259	1,134	1,870	X X X	X X X
10. 2010	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	220	1,056	X X X	X X X
11. 2011	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	639	X X X	X X X

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 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011
1. Prior	493	182	105	105		62	58			
2. 2002	221	125	48	23	24	16				
3. 2003	X X X	488	144	15	16	16				
4. 2004	X X X	X X X	282	49	5					
5. 2005	X X X	X X X	X X X	425	197	150	38	38	8	
6. 2006	X X X	X X X	X X X	X X X	543	92	44	10		
7. 2007	X X X	X X X	X X X	X X X	X X X	495	93	13		
8. 2008	X X X	X X X	X X X	X X X	X X X	X X X	458	110	16	
9. 2009	X X X	X X X	X X X	X X X	X X X	X X X	X X X	439	158	73
10. 2010	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	360	127
11. 2011	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	435

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

States, Etc.		1	Gross Premiums, Including Policy and Membership Fees Less Return Premiums and Premiums on Policies Not Taken		4	5	6	7	8	9
		Active Status	2 Direct Premiums Written	3 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Losses Paid (Deducting Salvage)	Direct Losses Incurred	Direct Losses Unpaid	Finance and Service Charges Not Included in Premiums	Direct Premium Written for Federal Purchasing Groups (Included in Column 2)
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	L	6,067,396	5,870,520		2,065,177	2,601,663	6,103,884		
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								
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)	 1	6,067,396	5,870,520		2,065,177	2,601,663	6,103,884		
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								

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

Premiums are allocated to states where insured risk is located

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE OHIO BAR LIAB INS CO
SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 - ORGANIZATIONAL CHART

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE OHIO BAR LIABILITY INSURANCE COMPANY

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES
OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

NOTE: All insurer members of a Holding Company Group shall prepare a common Schedule for inclusion in each of the individual annual statements and the consolidated Fire and Casualty Annual Statement of the Group

PART 1 - ORGANIZATIONAL CHART

Attach a chart or listing presenting the identities of and interrelationships between the parent, all affiliated insurers and other affiliates, identifying all insurers as such and listing the Federal Employer's Identification Number for each. The NAIC Company Code and two-letter state abbreviation of the state of domicile should be included for all domestic insurers. The relationships of the Holding Company Group to the ultimate parent (if such parent is outside the reported holding company) should be shown. No non-insurer need be shown if it does not have any activities reported in Part 2 and its total assets are less than one-half of one percent of the total assets of the largest affiliated insurer.

Ohio State Bar
Association
31-4271520
(Nonprofit Ohio
unincorporated association)

100% Common Stock

OF

Ohio Bar Liability Insurance Company
(Ohio Corporation)

100%

OF

1650 Lake Shore, Inc.

31-1394604

Note:

The Ohio State Bar Association ("OSBA") owns 100% of the outstanding Common Stock of Ohio Bar Liability Insurance Company ("OBLIC"). Under the Articles of Incorporation of OBLIC, holders of the Common Stock are entitled to elect not less than 5 or more than 21 directors of OBLIC.
In 1993, OBLIC formed 1650 Lake Shore, Inc., a real estate holding company, by contributing \$4 million in cash in exchange for 100% of the stock of 1650 Lake Shore, Inc.

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