

There was a change in our expense allocation distribution



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

ANNUAL STATEMENT
FOR THE YEAR ENDED DECEMBER 31, 2013
OF THE CONDITION AND AFFAIRS OF THE

Nationwide Insurance Company of Florida

NAIC Group Code	0140 (Current)	0140 (Prior)	NAIC Company Code	10948	Employer's ID Number	31-1613686
Organized under the Laws of	Ohio			State of Domicile or Port of Entry		Ohio
Country of Domicile	United States of America					
Incorporated/Organized	08/18/1998			Commenced Business		08/18/1998
Statutory Home Office	One West Nationwide Blvd. (Street and Number)			Columbus , OH, US 43215-2220 (City or Town, State, Country and Zip Code)		
Main Administrative Office	1100 Locust Street (Street and Number)					
	Des Moines , IA, US 50391-1100 (City or Town, State, Country and Zip Code)			614-249-7111 (Area Code) (Telephone Number)		
Mail Address	One West Nationwide Blvd., 1-04-701 (Street and Number or P.O. Box)			Columbus , OH, US 43215-2220 (City or Town, State, Country and Zip Code)		
Primary Location of Books and Records	One West Nationwide Blvd., 1-04-701 (Street and Number)					
	Columbus , OH, US 43215-2220 (City or Town, State, Country and Zip Code)			614-249-1545 (Area Code) (Telephone Number)		
Internet Website Address	www.nationwide.com					
Statutory Statement Contact	Monda S. Caudill (Name)			614-249-1545 (Area Code) (Telephone Number)		
	FinRpt@nationwide.com (E-mail Address)			866-315-1430 (FAX Number)		

OFFICERS

President	James Ernest Larsen #	VP & Treasurer	Wendell Paul Crosser
VP & Secretary	Robert William Horner III		

OTHER

Pamela Ann Biesecker	Sr VP-Head of Taxation	Jennifer Marie Hanley #	Sr VP
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DIRECTORS OR TRUSTEES

David Gerard Arango	Wesley Kim Austen	Mark Allen Berven
Thomas Edward Clark #	Jeff Millard Rommel	

State of	Ohio	SS:
County of	Franklin	

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.

James Ernest Larsen President	Robert William Horner III VP & Secretary	Wendell Paul Crosser VP & Treasurer
Subscribed and sworn to before me this		a. Is this an original filing?
day of January, 2014		b. If no, Yes [] No [X]
		1. State the amendment number.....1
		2. Date filed04/01/2014
		3. Number of pages attached..... 1

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE NATIONWIDE INSURANCE COMPANY OF FLORIDA

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	1,038,724			1,038,724
1.2 Reinsurance assumed				
1.3 Reinsurance ceded				
1.4 Net claim adjustment service (1.1 + 1.2 - 1.3)	1,038,724			1,038,724
2. Commission and brokerage:				
2.1 Direct excluding contingent		4,873,269		4,873,269
2.2 Reinsurance assumed, excluding contingent				
2.3 Reinsurance ceded, excluding contingent				
2.4 Contingent - direct		530,236		530,236
2.5 Contingent - reinsurance assumed				
2.6 Contingent - reinsurance ceded				
2.7 Policy and membership fees				
2.8 Net commission and brokerage (2.1 + 2.2 - 2.3 + 2.4 + 2.5 - 2.6 + 2.7)		5,403,505		5,403,505
3. Allowances to managers and agents	25	190,048	5	190,078
4. Advertising	2,803	456,181	39	459,023
5. Boards, bureaus and associations	42,404	115,976	5,117	163,497
6. Surveys and underwriting reports	3,337	400,011	2	403,350
7. Audit of assureds' records				
8. Salary and related items:				
8.1 Salaries	973,859	2,472,509	426,074	3,872,442
8.2 Payroll taxes	17	311,715		311,732
9. Employee relations and welfare	181,486	37,527	73,669	292,682
10. Insurance		5		5
11. Directors' fees				
12. Travel and travel items	147,465	189,799	11,557	348,821
13. Rent and rent items	46,976	194,156	16,254	257,386
14. Equipment	31,406	99,682	61,700	192,788
15. Cost or depreciation of EDP equipment and software	5,424	95,840	242	101,506
16. Printing and stationery	18,047	204,053	245	222,345
17. Postage, telephone and telegraph, exchange and express	38,662	257,068	9,812	305,542
18. Legal and auditing	164,805	448,590	6,553	619,948
19. Totals (Lines 3 to 18)	1,656,716	5,473,160	611,269	7,741,145
20. Taxes, licenses and fees:				
20.1 State and local insurance taxes deducting guaranty association credits of \$		795,758		795,758
20.2 Insurance department licenses and fees		88,657		88,657
20.3 Gross guaranty association assessments		503,270		503,270
20.4 All other (excluding federal and foreign income and real estate)		(9,029)		(9,029)
20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4)		1,378,656		1,378,656
21. Real estate expenses				
22. Real estate taxes				
23. Reimbursements by uninsured plans				
24. Aggregate write-ins for miscellaneous expenses	297,905	1,373,038	3,545	1,674,488
25. Total expenses incurred	2,993,345	13,628,359	614,814 (a)	17,236,518
26. Less unpaid expenses - current year	3,652,058	309,477		3,961,535
27. Add unpaid expenses - prior year	5,102,439	209,437		5,311,876
28. Amounts receivable relating to uninsured plans, prior year				
29. Amounts receivable relating to uninsured plans, current year				
30. TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29)	4,443,726	13,528,319	614,814	18,586,859
DETAILS OF WRITE-INS				
2401. Other (income)/expense	314,787	1,268,347		1,583,134
2402. Outside services and income	(16,882)	65,133	3,545	51,796
2403. Service fees		39,558		39,558
2498. Summary of remaining write-ins for Line 24 from overflow page				
2499. Totals (Lines 2401 thru 2403 plus 2498)(Line 24 above)	297,905	1,373,038	3,545	1,674,488

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