

There was a change in our expense allocation distribution



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

ANNUAL STATEMENTFOR THE YEAR ENDED DECEMBER 31, 2013
OF THE CONDITION AND AFFAIRS OF THE**Nationwide Insurance Company of Florida**NAIC Group Code 0140 NAIC Company Code 10948 Employer's ID Number 31-1613686
(Current) (Prior)Organized under the Laws of Ohio, State of Domicile or Port of Entry Ohio
Country of Domicile United States of AmericaIncorporated/Organized 08/18/1998 Commenced Business 08/18/1998Statutory Home Office One West Nationwide Blvd., Columbus, OH, US 43215-2220
(Street and Number) (City or Town, State, Country and Zip Code)Main Administrative Office 1100 Locust Street
(Street and Number) Des Moines, IA, US 50391-1100, 614-249-7111
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)Mail Address One West Nationwide Blvd., 1-04-701, Columbus, OH, US 43215-2220
(Street and Number or P.O. Box) (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, 614-249-1545
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)Internet Website Address www.nationwide.comStatutory Statement Contact Monda S. Caudill, 614-249-1545
(Name) FinRpt@nationwide.com, 866-315-1430
(E-mail Address) (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**DIRECTORS OR TRUSTEES**David Gerard Arango Wesley Kim Austen Mark Allen Berven
Thomas Edward Clark # Jeff Millard RommelState of Ohio SS: Franklin
County of

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
PresidentRobert William Horner III
VP & SecretaryWendell Paul Crosser
VP & TreasurerSubscribed and sworn to before me this
day of January, 2014

a. Is this an original filing? Yes [] No [X]
 b. If no,
 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 Loss Adjustment Expenses	2 Other Underwriting Expenses	3 Investment Expenses	4 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.