

Changed response to Question #6 to No.



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

ANNUAL STATEMENTFOR THE YEAR ENDED DECEMBER 31, 2013
OF THE CONDITION AND AFFAIRS OF THE**The Celina Mutual Insurance Company**NAIC Group Code 0035 0035 NAIC Company Code 20176 Employer's ID Number 34-4202015
(Current) (Prior)Organized under the Laws of _____, State of Domicile or Port of Entry _____
Country of Domicile _____ Ohio _____ United States of AmericaIncorporated/Organized 11/12/1919 Commenced Business 02/23/1920Statutory Home Office 1 Insurance Square, Celina, OH, US 45822-1690
(Street and Number) (City or Town, State, Country and Zip Code)Main Administrative Office 1 Insurance Square, 419-586-5181
(Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)Mail Address 1 Insurance Square, Celina, OH, US 45822-1690
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)Primary Location of Books and Records 1 Insurance Square, 419-586-5181-8227
(Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)Internet Website Address www.celinainsurance.comStatutory Statement Contact Philip Marion Fullenkamp, 419-586-5181-8227
(Name) pfullenkamp@celinainsurance.com, 419-586-6068
(E-mail Address) (Area Code) (Telephone Number) (FAX Number)**OFFICERS**President William West Montgomery Treasurer Philip Marion Fullenkamp
Secretary Michael Stanley Kleinhenz**OTHER**William Rodney Stapleton Sr. VP and COO Robert Mark Shoenfelt Sr. VP and CIO Vincent Miles Franz VP and Chief Actuary
Theodore Joseph Wissman VP - Claims Martha Jane Meinerding VP - Human Resources**DIRECTORS OR TRUSTEES**
William West Montgomery - Chairman Philip Marion Fullenkamp Nancy Montgomery Goldberg
David Thomas Mellin Wesley Moore Jetter John Michael Lazarich
Collin Jay BryanState of Ohio SS: _____
County of Mercer

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.

William West Montgomery
Chairman, President and CEO_____
Michael Stanley Kleinhenz
Secretary and Assistant Treasurer_____
Philip Marion Fullenkamp
Sr. VP - CFO and TreasurerSubscribed and sworn to before me this
day of June 2014

a. Is this an original filing? Yes [] No [X]
 b. If no,
 1. State the amendment number.....1
 2. Date filed06/02/2014
 3. Number of pages attached..... 1