

Electronic Notes #19 was incomplete in the original filing.



ANNUAL STATEMENT
FOR THE YEAR ENDING DECEMBER 31, 2019
OF THE CONDITION AND AFFAIRS OF THE

Envision Insurance Company

(Name)

NAIC Group Code 00000 (Current Period) , 00000 (Prior Period) NAIC Company Code 12747 Employer's ID Number 20-4308924

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

Country of Domicile United States

Licensed as business type: Life, Accident & Health [X] Property/Casualty [] Hospital, Medical & Dental Service or Indemnity []
Dental Service Corporation [] Vision Service Corporation [] Health Maintenance Organization []
Other [] Is HMO, Federally Qualified? Yes [] No []

Incorporated/Organized 02/08/2006 Commenced Business 01/01/2007

Statutory Home Office 2181 East Aurora Road , Twinsburg, OH, US 44087
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 2181 East Aurora Road
(Street and Number)
Twinsburg, OH, US 44087 330-405-8089
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address 2181 East Aurora Road , Twinsburg, OH, US 44087
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 2181 East Aurora Road
(Street and Number)
Twinsburg, OH, US 44087 330-405-8089
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number) (Extension)

Internet Web Site Address www.envisionrx.com

Statutory Statement Contact Scott David Gonia CPA , 330-486-4846
(Name) (Area Code) (Telephone Number) (Extension)
eicaccounting@envisionrx.com 330-486-4801
(E-Mail Address) (Fax Number)

OFFICERS

Name	Title	Name	Title
William Carl Epling	President	Scott David Gonia	Treasurer
Robert Burns Weinberg	Senior Vice President, General Counsel & Secretary	Thomas John Welsh	Chief Financial Officer & Executive Vice President

OTHER OFFICERS

_____, _____, _____, _____

DIRECTORS OR TRUSTEES

William Carl Epling	Brian Todd Hoover #	Matthew Charles Schroeder	Thomas John Welsh
Susan Catherine Lowell #			

State ofOhio.....

County ofSummit.....

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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.

Thomas John Welsh Chief Financial Officer & Excutive Vice President	Scott David Gonia Treasurer	Robert Burns Weinberg Senior Vice President, General Counsel & Secretary
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Subscribed and sworn to before me this _____ day of _____ , _____

a. Is this an original filing? Yes [] No [X]
b. If no:
1. State the amendment number 1
2. Date filed 03/23/2020
3. Number of pages attached 1