
AMENDED FILING EXPLANATION

Refilled Schedule Y part 2 due to a correction to the inter-company quota-share reinsurance agreements. Changes were made to columns 8, 9, and 13 for the below companies:

ARX Holdings Corp
American Strategic Insurance Corp
ASI Lloyds
Progressive Property Insurance Company
ASI Assurance Corp
ASI Home Insurance Corp
ASI Preferred Insurance Corp
ASI Select Insurance Corp



ANNUAL STATEMENT

For the Year Ended December 31, 2019
of the Condition and Affairs of the

PROGRESSIVE PREMIER INSURANCE COMPANY OF ILLINOIS

NAIC Group Code.....155, 155 (Current Period) (Prior Period)	NAIC Company Code..... 21735	Employer's ID Number..... 36-3789786
Organized under the Laws of OH	State of Domicile or Port of Entry OH	Country of Domicile US
Incorporated/Organized..... September 13, 1992	Commenced Business..... November 16, 1992	
Statutory Home Office	6300 WILSON MILLS ROAD, W33 .. CLEVELAND .. OH .. US .. 44143-2182 (Street and Number) (City or Town, State, Country and Zip Code)	
Main Administrative Office	6300 WILSON MILLS ROAD, W33 .. CLEVELAND .. OH .. US .. 44143-2182 (Street and Number) (City or Town, State, Country and Zip Code)	440-461-5000 (Area Code) (Telephone Number)
Mail Address	P.O. BOX 89490 .. CLEVELAND .. OH .. US .. 44101-6490 (Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)	
Primary Location of Books and Records	6300 WILSON MILLS ROAD, W33 .. CLEVELAND .. OH .. US .. 44143-2182 (Street and Number) (City or Town, State, Country and Zip Code)	440-395-4460 (Area Code) (Telephone Number)
Internet Web Site Address	PROGRESSIVE.COM	
Statutory Statement Contact	MARY BETH ANDREANO (Name) FINANCIAL_REPORTING@PROGRESSIVE.COM (E-Mail Address)	440-395-4460 (Area Code) (Telephone Number) 440-603-5500 (Fax Number)

POLICYHOLDER SERVICES AND CLAIMS REPORTING -- 1-800-PROGRESSIVE (1-800-776-4737)

OFFICERS

Name PATRICK KEVIN CALLAHAN DANIEL JOSEPH WITALEC	Title PRESIDENT TREASURER	Name MICHAEL ROBERT UTH	Title SECRETARY
---	---------------------------------	----------------------------	--------------------

OTHER

CARL GORDON JOYCE # SANDRA LEE RIHALSKY #	(VICE PRESIDENT) (ASST. TREASURER)	KAREN ANN KOSUDA DANIEL JOSEPH WITALEC	(ASST. SECRETARY) (VICE PRESIDENT)
--	---------------------------------------	---	---------------------------------------

DIRECTORS OR TRUSTEES

PATRICK KEVIN CALLAHAN SCOTT WESLEY ZIEGLER	MICHAEL VINCENT ESPOSITO	BRIAN JACOB GURA	DANIEL JOSEPH WITALEC
--	--------------------------	------------------	-----------------------

State of..... OHIO
County of.... CUYAHOGA

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.

(Signature) PATRICK KEVIN CALLAHAN	(Signature) KAREN ANN KOSUDA	(Signature) SANDRA LEE RIHALSKY #
1. (Printed Name) PRESIDENT	2. (Printed Name) ASSISTANT SECRETARY	3. (Printed Name) ASSISTANT TREASURER
(Title)	(Title)	(Title)

Subscribed and sworn to before me
This 3RD day of APRIL, 2020

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

1

APRIL 3, 2020

3