



2021

Document Code: 201

QUARTERLY STATEMENT
AS OF SEPTEMBER 30, 2021
OF THE CONDITION AND AFFAIRS OF THE
Perennial Advantage of Ohio, Inc.

NAIC Group Code	0000 (Current Period)	0000 (Prior Period)	NAIC Company Code	16783	Employer's ID Number	84-3881087
Organized under the Laws of	OH		State of Domicile or Port of Entry		OH	
Country of Domicile	United States					
Licensed as business type:	Life, Accident & Health <input type="checkbox"/>	Property/Casualty <input type="checkbox"/>	Hospital, Medical & Dental Service or Indemnity <input type="checkbox"/>			
	Dental Service Corporation <input type="checkbox"/>	Vision Service Corporation <input type="checkbox"/>	Health Maintenance Organization <input checked="" type="checkbox"/>			
	Other <input type="checkbox"/>	Is HMO Federally Qualified? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>				
Incorporated/Organized	08/23/2019		Commenced Business	01/01/2021		
Statutory Home Office	9200 Worthington Rd (Street and Number)		Westerville, OH, US 43082 (City or Town, State, County and Zip Code)			
Main Administrative Office	10900 Nuckols Road STE 110 (Street and Number)					
	Glen Allen, VA, US 23060 (City or Town, State, County and Zip Code)		(804)396-6412 (Area Code) (Telephone Number)			
Mail Address	10900 Nuckols Road STE 110 (Street and Number or P.O. Box)		Glen Allen, VA, US 23060 (City or Town, State, County and Zip Code)			
Primary Location of Books and Records	10900 Nuckols Road STE 110 (Street and Number)					
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Internet Web Site Address	N/A					
Statutory Statement Contact	Robert Ragland (Name)		(804)220-6171 (Area Code)(Telephone Number)(Extension)			
	regulatoryaccounting@allyalign.com (E-Mail Address)		(804)241-1577 (Fax Number)			

OFFICERS

Name	Title
Lynne Susan Katzmann	President
Laurence Charles Gurnina	Secretary
Anne Pearson Role	Treasurer #

OTHERS

DIRECTORS OR TRUSTEES

Jill Anne Vitale-Aussem #

State of Ohio
County of Delaware ss

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)

Lynne Susan Katzmann

(Printed Name)

1.

President

(Title)

(Signature)

Laurence Charles Gurnina

(Printed Name)

2.

Secretary

(Title)

(Signature)

Anne Pearson Role

(Printed Name)

3.

Treasurer

(Title)

Subscribed and sworn to before me this

30th day of Sept, 2021

a. Is this an original filing?

b. If no,

1. State the amendment number
2. Date filed
3. Number of pages attached

Yes No

(Notary Public Name)
Lynne K Katzmann
Notary Public
New Jersey
My Commission Expires 2-20-2023
No. 2210050



16783202120100103

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Laurence Charles Gumina	Secretary
Anne Pearson Rote	Treasurer #

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DIRECTORS OR TRUSTEES

Jill Anne Vitale-Aussem #

State of	Ohio
County of	Delaware ss

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(Signature)
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(Printed Name)
1.
President
(Title)

Signature
Laurence Charles Gumina
(Printed Name)
2.
Secretary
(Title)

(Signature)
Anne Pearson Rote
(Printed Name)
3.
Treasurer
(Title)

Subscribed and sworn to before me this
4th day of October, 2021

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

Yes No



LAUREN M. MATHIS
 Notary Public, State of Ohio
 My Commission Expires 01-02-2023



16783202120100103

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(Printed Name)
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(Printed Name)
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Secretary
(Title)

Anne P. Rote
(Signature)
Anne Pearson Rote
(Printed Name)
3.
Treasurer
(Title)

Subscribed and sworn to before me this
04 day of October, 2021

Brittany Loren Russell
(Notary Public Signature)

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

Yes No