



QUARTERLY STATEMENT

AS OF MARCH 31, 2025
OF THE CONDITION AND AFFAIRS OF THE

Northwest Ohio Business Alliance Health & Wellness Trust

NAIC Group Code 0000 17313 NAIC Company Code 17313 Employer's ID Number 88-1977111
(Current Period) (Prior Period)

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

Country of Domicile US

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

Incorporated/Organized March 24, 2022 Commenced Business May 01, 2022

Statutory Home Office 5832 N Main Street, Sylvania, Ohio, US 43560
(Street and Number, City or Town, State, Country and Zip Code)

Main Administrative Office 5832 N Main Street, Sylvania, Ohio, US 43560 419) 882-2135
(Street and Number, City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address 5832 N Main Street, Sylvania, Ohio, US 43560
(Street and Number or P.O. Box, City or Town, State, Country and Zip Code)

Primary Location of Books and Records 5832 N Main Street, Sylvania, Ohio, US 43560
(Street and Number, City or Town, State, Country and Zip Code)

419) 882-2135
(Area Code) (Telephone Number)

Internet Website Address N/A

Statutory Statement Contact Tiffany Lynn Scott Bosch (419) 882-2135
(Name) (Area Code) (Telephone Number) (Extension)

tbosch@syvalianachamber.org _____
(E-mail Address) (Fax Number)

OFFICERS

Tiffany Lynn Scott Bosch (Chairperson and Trustee)
Joshua Burnell Torres (Trustee)

OTHER OFFICERS

DIRECTORS OR TRUSTEES

Tiffany Lynn Scott Bosch
Joshua Burnell Torres

State of OH
County of Lucas } 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.

T. Bosch
Tiffany Lynn Scott Bosch
Chairperson and Trustee

J. Torres
Joshua Burnell Torres
Trustee

Subscribed and sworn to before me this

5-19-25

a. Is this an original filing? Yes (X) No ()

b. If no: 1. State the amendment number

2. Date filed May 15, 2025

Number of pages attached

Edward J. McKinney



EDWARD J. MCKINNEY
Notary Public, State of Ohio
Commission No. 2019-RE-792466
My Commission Expires
August 17, 2029