PUBLIC NOTICE

0

STATE OF NORTH DAKOTA

OFFICE OF THE COMMISSIONER
OF INSURANCE

Jon Godfread, Commissioner of Insurance of the State of North Da-kota, do hereby certify that the fore-going is a true Abstract of Statement,

Total Accident

Health Direct

Losses Incurred

PUBLIC NOTICE

22209 ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024 of the

Freedom Specialty Insurance Company In the state of Ohio Total Assets 77,087,429

Total Liabilities Aggregate write-ins for special surplus funds Common Capital 3,504,000 Stock Preferred Capi- 0

Funds
Surplus Notes 0
Gross Paid in
and 9,000,000
Contributed
Surplus
Unassigned 13,617,756
funds (surplus)
Total Capital and 26,121,756
Surplus

NORTH DAKOTA BUSINESS

ONLY FOR THE YEAR 2024

STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE

hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2025

JON GODFREAD
Commissioner of Insurance
STATE OF NORTH DAKOTA
OFFICE OF THE COMMISSIONER
OF INSURANCE
COMPANY'S CERTIFICATE OF
AUTHORITY
WHEREAS, the above corporation
duly organized under the laws of its
state or country of domicile, has filed
in this office a sworn statement ex-

in this office a sworn statement ex-

hibiting its condition and business for the year ending December 31, 2024 conformable to the requirements of the laws of this State regarding the business of insurance and

WHEREAS, the said company has filed in this office a duly certified copy of its charter with certificate of

organization in compliance with the

requirements of insurance law afore-

said, NOW THEREFORE, I, JON GOD-FREAD, Commissioner of Insurance of the State of North Dakota, pursu-

ant to the provisions of said laws, do hereby certify that the above named company is fully empowered through

its authorized agents and represen-tatives, to transact its appropriated business of authorized insurance

in the state according to the laws thereof, until the 30th day of April,

A.D. 2026.
IN TESTIMONY WHEREOF, I have

Hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025 (SEAL)

ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024

of the

778,819,845 499,260,447

43,562,074

778,819,845

1,883,456

40,215

Twin City Fire Insurance Company

29459

JON GODFREAD

Commissioner of Insurance

(May. 5 & 12 & 19, 2025)

In the state of Indiana Total Assets Total Liabilities

surplus funds Common Capital 4,200,000

Unassigned 231,797,324 funds (surplus)
Total Capital and 279,559,398

NORTH DAKOTA BUSINESS ONLY

FOR THE YEAR 2024

Aggregate write-ins for special

tal Stock

Aggregate Write-ins for

Other Than Special Surplus Funds Surplus Notes Gross Paid in

and Contributed Surplus

Surplus Total Liabilities, Capital

And Surplus

Total Direct

Total Accident

Health Direct

Premiums Earned

Premiums

Losses Incurred

and

Stock Preferred Capi-

14,925

(2.044)

Surplus Total Liabilities, Capital

And Surplus

Total Direct

Premiums Earned Total Direct

Incurred Total Accident

Health Direct

Total Accident

and Health Direct

Losses Incurred

JON GODFREAD

Premiums Earned

Losses

and

as officially filed by the Company in this office.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2025 tal Stock Aggregate Write-ins for JON GODFREAD Other Than Special Surplus Funds

103,209,185

Commissioner of Insurance STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE

COMPANY'S CERTIFICATE OF AUTHORITY
WHEREAS, the above corporation duly organized under the laws of its state or country of domicile, has filed in this office a sworn statement ex-In this office a sworn statement exhibiting its condition and business for the year ending December 31, 2024 conformable to the requirements of the laws of this State regarding the business of insurance and WHEREAS, the said company has filed in this office a duly certified

filed in this office a duly certified copy of its charter with certificate of organization in compliance with the requirements of insurance law afore-

NOW THEREFORE, I, JON GOD-FREAD, Commissioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above named company is fully empowered through its authorized agents and representatives, to transact its appropriated business of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2026. IN TESTIMONY WHEREOF, I have

hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025 OF INSURANCE
I, Jon Godfread, Commissioner of
Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement,
as officially filed by the Company in
this office.

IN TESTIMONY WHEREOF, I have
because set my hand and officed (SEAL)
JON GODFREAD

Commissioner of Insurance (May. 5 & 12 & 19, 2025)

18139 ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024 of the Peak Property And Casualty Insur-

ance Corporation
In the state of Wisconsin **Total Assets**

Total Liabilities 10.184.190 Aggregate write-ins for special surplus funds Common Capital 3,500,000 Stock Preferred Capital Stock Aggregate Write-ins for Other Than Special Surplus Funds Surplus Notes Gross Paid in 0 33,447,823 and Contributed Surplus Unassigned 27,449,982 funds (surplus) Total Capital and 64,397,805 Surplus Total Liabilities,

NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024

74,581,995

Total Direct Premiums 0 Total Direct Losses 0 Incurred Total Accident 0 Health Direct Premiums Total Accident Health Direct

And Surplus

STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE

I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in this office.

this office.
IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2025 JON GODFREAD

JON GODFREAD
Commissioner of Insurance
STATE OF NORTH DAKOTA
OFFICE OF THE COMMISSIONER
OF INSURANCE
COMPANY'S CERTIFICATE OF
AUTHORITY
WHEREAS, the above corporation
duly organized under the laws of its
state or country of domicile, has filed
in this office a sworn statement exin this office a sworn statement exhibiting its condition and business for the year ending December 31, 2024 conformable to the requirements of the laws of this State regarding the business of insurance and

WHEREAS, the said company has filed in this office a duly certified copy of its charter with certificate of organization in compliance with the requirements of insurance law afore-

NOW THEREFORE, I, JON GOD-FREAD, Commissioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above named company is fully empowered through its authorized agents and represen-tatives, to transact its appropriated



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PUBLIC NOTICE

business of authorized insurance in the state according to the laws thereof, until the 30th day of April, IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of March,

A.D., 2025 JON GODFREAD Commissioner of Insurance

(May. 5 & 12 & 19, 2025)

A0142
ABSTRACT OF STATEMENT
FOR THE YEAR ENDING
DECEMBER 31, 2024
Of the

In the state of Illinois Total Assets Total Liabilities 257 117 686 Aggregate write-ins for special surplus funds Common Capital 5,000,000 Preferred Capital Stock Aggregate Write-ins for Other Than Special Surplus Surplus Notes Gross Paid in and Contributed 192,140,590 Surplus Unassigned 5,342,590

NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024 Total Direct

257,117,686

funds (surplus) Total Capital and 202,483,180

Surplus

Total Liabilities

And Surplus

1,408,594 Premiums Earned Total Direct 6,007,320 Losses Incurred Total Accident Health Direct Premiums Earned Total Accident and 0 Health Direct

Losses Incurred

STATE OF NORTH DAKOTA

OFFICE OF THE COMMISSIONER
OF INSURANCE
I, Jon Godfread, Commissioner of
Insurance of the State of North Dakota, do hereby certify that the fore-going is a true Abstract of Statement, as officially filed by the Company in this office. this office.
IN TESTIMONY WHEREOF, I have

hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2025 JON GODFREAD Commissioner of Insurance
STATE OF NORTH DAKOTA

OFFICE OF THE COMMISSIONER
OF INSURANCE
COMPANY'S CERTIFICATE OF
AUTHORITY
WHEREAS, the above corporation

duly organized under the laws of its state or country of domicile, has filed in this office a sworn statement exin this office a sworn statement exhibiting its condition and business for the year ending December 31, 2024 conformable to the requirements of the laws of this State regarding the business of insurance and WHEREAS, the said company has filed in this office a duly certified copy of its charter with certificate of organization in compliance with the requirements of insurance law afore-

requirements of insurance law afore-

NOW THEREFORE, I, JON GOD-FREAD, Commissioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above named company is fully empowered through its authorized agents and representatives, to transact its appropriated business of authorized insurance in the state according to the laws thereof, until the 30th day of April, A D 2026

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025 JON GODFREAD

(May. 5 & 12 & 19, 2025)

ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024

of the
Endurance Assurance Corporation In the state of Delaware 19,035,277,627 14,753,977,313 **Total Assets** Total Liabilities Aggregate 1,292,522 for special surplus funds Common Capital 5,000,000 Stock Preferred Capital Stock Aggregate Write-ins for Other Than Special Surplus Funds Surplus Notes Gross Paid in 3.480.137.280 and Contributed Surplus Unassigned 794,870,512 funds (surplus) Total Capital and 4,281,300,314 Surplus Total Liabilities 19,035,277,627

And Surplus NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024

Total Direct 742,282 Premiums Total Direct 11,741 Incurred Total Accident and Health Direct Premiums Earned Total Accident 0 and Health Direct

Losses Incurred STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE I, Jon Godfread, Commissioner of Insurance of the State of North Da-

kota, do hereby certify that the fore-going is a true Abstract of Statement, as officially filed by the Company in

as official incomplete this office.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2025 JON GODFREAD

Commissioner of Insurance STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER
OF INSURANCE
COMPANY'S CERTIFICATE OF
AUTHORITY
WHEREAS, the above corporation

PUBLIC NOTICE

duly organized under the laws of its state or country of domicile, has filed in this office a sworn statement exhibiting its condition and business for the year ending December 31, 2024 conformable to the requirements of the laws of this State regarding the business of insurance and WHEREAS, the said company has filed in this office a duly certified copy of its charter with certificate of organization in compliance with the

organization in compliance with the requirements of insurance law aforesaid NOW THEREFORE, I, JON GOD-

FREAD, Commissioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above named company is fully empowered through its authorized agents and representatives, to transact its appropriated business of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2026.

IN TESTIMONY WHEREOF, I have bergunts est my hand and seel at

hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025 (SEAL) JON GODFREAD

Commissioner of Insurance (May. 5 & 12 & 19, 2025)

poration Of Ohio

ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024 of the Permanent General Assurance Cor-

In the state of Wisconsin 69,546,560 23,922,329 Total Assets **Total Liabilities** Aggregate write-ins for special surplus funds Common Capital 3,000,000 Stock Preferred Capital Stock Aggregate Write-ins for Other Than Special Surplus Funds Surplus Notes Gross Paid in and 41,277,103 Contributed Surplus
Unassigned 1,347,128
funds (surplus)
Total Capital and 45,624,231

69,546,560 Capital And Surplus **NORTH DAKOTA BUSINESS**

ONLY FOR THE YEAR 2024 Total Direct Premiums Earned Total Direct Losses Incurred Total Accident and Health Direct Premiums Earned **Total Accident** Health Direct Losses Incurred

Surplus Total Liabilities,

STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE

OF INSURANCE
I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in this office.

this office.
IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2025 (SEAL)

JON GODFREAD Commissioner of Insurance STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE COMPANY'S CERTIFICATE OF AUTHORITY WHEREAS, the above corporation duly organized under the laws of its state or country of domicile, has filed in this office a sworn statement ex-

in this office a sworn statement exhibiting its condition and business for the year ending December 31, 2024 conformable to the requirements of the laws of this State regarding the business of insurance and

WHEREAS, the said company has filed in this office a duly certified copy of its charter with certificate of organization in compliance with the requirements of insurance law afore-

NOW THEREFORE, I, JON GOD-FREAD, Commissioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above named company is fully empowered through its authorized agents and represen-tatives, to transact its appropriated business of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2026. IN TESTIMONY WHEREOF, I have

hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025 (SEAL)

JON GODFREAD Commissioner of Insurance

(May. 5 & 12 & 19, 2025)

Total Assets Total Liabilities

ABSTRACT OF STATEMENT FOR THE YEAR ENDING **DECEMBER 31, 2024** of the Centre Insurance Company In the state of Delaware

24,074,967 13,494,165

Aggregate write-ins 0 for special surplus funds Common Capital 5,000,000 Stock Preferred Capital Stock Aggregate Write-ins for Other Than Special Surplus Funds Surplus Notes Gross Paid in and Contributed 5,238,396 Surplus Unassigned 342,406 funds (surplus) Total Capital and 10,580,802 Surplus Total Liabilities, 24,074,967 Capital And Surplus

NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024

Total Direct Premiums Farned Total Direct 0 Losses Incurred Total Accident and Health Direct Premiums Earned Total Accident and Health Direct Losses Incurred

PUBLIC NOTICE

STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE

I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the fore-going is a true Abstract of Statement, as officially filed by the Company in this office.
IN TESTIMONY WHEREOF, I have

hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2025 JON GODFREAD

JON GODFREAD
Commisconer of Insurance
STATE OF NORTH DAKOTA
OFFICE OF THE COMMISSIONER
OF INSURANCE
COMPANY'S CERTIFICATE OF
AUTHORITY
WHEREAS, the above corporation
duly organized under the laws of its
state or country of domicile, has filed
in this office a sworn statement exhibiting its condition and business for
the year ending December 31, 2024 the year ending December 31, 2024 conformable to the requirements of the laws of this State regarding the business of insurance and WHEREAS, the said company has filed in this office a duly certified copy of its charter with certificate of

organization in compliance with the requirements of insurance law afore-NOW THEREFORE, I, JON GOD-NOW THEREFORE, I, JON GOD-FREAD, Commissioner of Insurance of the State of North Dakota, pursu-ant to the provisions of said laws, do hereby certify that the above named company is fully empowered through its authorized agents and represen-tatives, to transact its appropriated husiness of authorized insurance

business of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2026.

IN TESTIMONY WHEREOF, I have

hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025 JON GODFREAD

Commissioner of Insurance

(May. 5 & 12 & 19, 2025)

ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024 of the Dairyland National Insurance Com-

In the state of Wisconsin **Total Assets** 16,328,549 Total Liabilities 296,716 Aggregate write-ins for special surplus funds Common Capital 3,000,000 Stock Preferred Capi-Aggregate
Write-ins for
Other Than Special Surplus Funds Surplus Notes Gross Paid in 12,000,000 and Contributed Surplus 1,031,833 Unassigned funds (surplus)
Total Capital and 16,031,833
Surplus
Total Liabilities,

Capital And Surplus NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024

16,328,549

Total Direct Premiums Earned Total Direct Losses Incurred Total Accident and Health Direct Premiums Earned Total Accident Health Direct

STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE

I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in IN TESTIMONY WHEREOF, I have

hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2025 (SEAL) JON GODFREAD

JON GODFREAD Commissioner of Insurance STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE COMPANY'S CERTIFICATE OF AUTHORITY WHEREAS, the above corporation duly organized under the laws of its state or country of domicille has filed

state or country of domicile, has filed in this office a sworn statement ex-hibiting its condition and business for the year ending December 31, 2024 conformable to the requirements of the laws of this State regarding the business of insurance and

WHEREAS, the said company has filed in this office a duly certified copy of its charter with certificate of organization in compliance with the requirements of insurance law afore-

NOW THEREFORE, I, JON GOD-FREAD, Commissioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above named company is fully empowered through its authorized agents and represen-tatives, to transact its appropriated business of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2026. IN TESTIMONY WHEREOF. I have

hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025 (SEAL) JON GODFREAD

Commissioner of Insurance (May. 5 & 12 & 19, 2025)

29424 ABSTRACT OF STATEMENT

FOR THE YEAR ENDING DECEMBER 31, 2024 of the Hartford Casualty Insurance Com-

pany In the state of Indiana **Total Assets** 2.274.137.557 Total Liabilities 1,797,459,032 Aggregate 0 write-ins for special surplus funds Common Capital 4,800,000 Stock Preferred Capital Stock

Aggregate Write-ins for Other Than Special Surplus Funds Surplus Notes Gross Paid in 351.468.871 and

570,409,654

Contributed Surplus

Unassigned funds (surplus)

PUBLIC NOTICE

Total Capital and 926,678,525 Surplus Total Liabilities, 2,724,137,557 And Surplus

NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024 **Total Direct**

Premiums Earned 273,040 Total Direct Insses 65,656 Incurred Total Accident and Health Direct Premiums Earned Total Accident

and Health Direct

Losses Incurred

STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE

I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in the office. as officially life by this office.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2025 JON GODFREAD

JON GODFREAD Commissioner of Insurance STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE COMPANY'S CERTIFICATE OF AUTHORITY WHEREAS, the above corporation duly organized under the laws of its state or country of domicile, has filed in this office a sworn statement ex-

in this office a sworn statement exhibiting its condition and business for the year ending December 31, 2024 conformable to the requirements of the laws of this State regarding the business of insurance and WHEREAS, the said company has filed in this office a duly certified copy of its charter with certificate of organization in compliance with the requirements of insurance law afore-

NOW THEREFORE, I, JON GOD-FREAD, Commissioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above named company is fully empowered through its authorized agents and represen-tatives, to transact its appropriated business of authorized insurance

in the state according to the laws thereof, until the 30th day of April, A.D. 2026. IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025

JON GODFREAD Commissioner of Insurance

(May. 5 & 12 & 19, 2025)

ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024 of the Sentinel Insurance Company, Ltd. In the state of Connecticut

377,215,907 99,184,598 Total Assets Total Liabilities Aggregate write-ins for special surplus funds Common Capital 4,200,000 Stock Preferred Capital Stock Aggregate Write-ins for Other Than Special Surplus Funds Surplus Notes Gross Paid in and 0 15.787.500 Contributed Surplus Unassigned 258,043,809 funds (surplus) Total Capital and 278,031,309 Surplus Total Liabilities

377,215,907 Capital And Surplus NORTH DAKOTA BUSINESS

ONLY FOR THE YEAR 2024 Total Direct Premiums 238,226 Earned Total Direct 44.835 Losses

and Health Direct

Premiums

Earned

Total Accident Health Direct Losses Incurred

STATE OF NORTH DAKOTA
OFFICE OF THE COMMISSIONER
OF INSURANCE
I, Jon Godfread, Commissioner of
Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement,
or efficielly filed by the Company in as officially filed by the Company in

this office.
IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2025 (SEAL) JON GODFREAD

JON GODI-HEAD Commissioner of Insurance STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE COMPANY'S CERTIFICATE OF AUTHORITY WHEREAS, the above corporation duly organized under the laws of its state or country of domicile, has filed in this office a sworn statement exhibiting its condition and business for

hibiting its condition and business for the year ending December 31, 2024 conformable to the requirements of the laws of this State regarding the business of insurance and WHEREAS, the said company has filed in this office a duly certified copy of its charter with certificate of copy of its charter with certificate of the company that the same than the same th

organization in compliance with the requirements of insurance law afore-

said, NOW THEREFORE, I, JON GOD-FREAD, Commissioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above named company is fully empowered through its authorized agents and represen-tatives, to transact its appropriated business of authorized insurance in the state according to the laws thereof, until the 30th day of April,

A.D. 2026.
IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025

JON GODFREAD Commissioner of Insurance

(May. 5 & 12 & 19, 2025) Place

your ad! 1-888-857-1920