

# 2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Mar 28, 2001 8:00 am  
Secretary of State

03-28-2001 90208 047 \*\*\*150.00

0389334

DOCUMENT # K94008

1. Entity Name

PRIMARY MARKETING GROUP, INC.

Name Change:  
WDF Inc.

Principal Place of Business

C/O SANDRA J. PENNER-FOX  
6201 PRESIDENTIAL CT- #102  
FORT MYERS FL 33919

Mailing Address

C/O SANDRA J. PENNER-FOX  
6201 PRESIDENTIAL CT- #102  
FORT MYERS FL 33919

LUUJ0007



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

Same as above

3. Mailing Address

Suite, Apt. #, etc.

18515 Deep Passage Lane

City & State

Zip

Country

City & State

Zip

Country

FL Myers Beach FL

33931

USA

4. FEI Number

65-0125578

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PENNER-FOX, SANDRA J.  
6201 PRESIDENTIAL CT.  
EMBASSY BLDG., UNIT 102  
FORT MYERS FL 33901

7. Name and Address of New Registered Agent

Name Sandra J. Penner-Fox  
Street Address (P.O. Box Number is Not Acceptable)  
18515 Deep Passage Lane  
City FL Myers Beach FL Zip Code 33931

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00  
After MAY 1, 2001 Fee will be \$550.00  
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE D  
NAME FOX, BILL J.  
STREET ADDRESS 18515 DEEP PASSAGE LN  
CITY-ST-ZIP FT MYERS BEACH FL

TITLE D  
NAME PENNER-FOX, SANDRA J.  
STREET ADDRESS 18515 DEEP PASSAGE LN  
CITY-ST-ZIP FT MYERS BEACH FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Sandra J. Penner-Fox Sandra J. Penner-Fox

Date

Daytime Phone #

2/14/01

941-433-5121

CR2E034 (10/00)