	PLEASE REA	D ALL INS	TRUCTIONS	S BEFORE C	OMPLET	ING THIS FOR			
AP!	PLICATION FOR	A S		STATE STATE		FILE		•	
DOCUMENT # P97000022276  1. Corporation Name					98 DEC 17 PM 2: L8				
PRIMARY FINANCIAL GROUP, INC.					SECRETARY OF STATE TALLAHASSEE, FLORIDA				
Principal Place of Business Mailing Add			ress	·					
			RWAY VILLAGE CT. # BEACH FL 33413						
If above addresses are incorrect in any way, line through incorrect information and enter correction below.  2. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable									
105 Waterway Village (t. 105			Waterway	Village Ct.	Date Incorporated or Qualified     To Do Business in Florida     03/11/1997				
Suite, Apt. #, etc.  Suite, Apt. #,  City & State  City & State					5. FEI Number	•	Appli	ied For	
	Pain Beach, FL	Vist Zip 334	Pain Bro		6.	431562 E OF STATUS DESIRED [	Not A \$8.75 Additional F for a Certificate		
	and Street Addresses of Each Officer	and/or Director (Fi	orida nonprofit corpo	rations must list at lea					
Title(s) 1	Name of Officers and/or Directors 2	1 0	Officer and/or Director se Post Office Box N	•	City /	State / Zip			
D	SCHAFF, SHIRLEY L	P.O. BOX 7809	69 Eway Villa	ige Gt,	ORLANDO FL 32787 West Pain	Bust	33413		
					9000027240895 -12/29/9801002019				
						****150.0	)() ****15 	0.00	
~			15	2/8	98 1	HC			
8. Name and Address of Current Registered Agent Name						9. Name and Address of New Registered Agent			
area por mare mare					Schaff P.O. Box Number is Not Acceptable) Sterway Village (4.				
PALM BEACH GARDENS FL 33418  Suite, Apt. #, Etc  City					um Beach State Zip Code				
10. I. being	appointed the registered agent of the	above named corp	oration, am familiar	with and accept the o	bligations of Secti	on 607.0505, F.S.		3	
10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.  Signature of Registered Agent  REGISTERED AGENT MUST SIGN									
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No No (See other side for information on intangible tax.)									
12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.									
SIGNATURE: SIGNATURE AND TYPED BY PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #									



Primary Financial Group, Inc.

Tuesday, November 17, 1998

Attn: Dept of Revocation

Re: Primary Financial Group, Inc.

I called your office regarding this revocation and the fact that your office has been sent, by me, a change of address twice and they continued to mail the notices to the old address.

The gentleman I spoke with at your office asked that I include this letter along with a \$150 fee and the late charge will be waived sinc I have not received any prior notices.

Please call me with any questions, my company is most definitely not in revocation status and I need this taken care of as soon as you possibly can. Thank you so much!

Universal Life Term Life

Estate Planning

Whole Life

Medicare Supplements

Annuities

Fixed Indexed Convertible Bond Options

Investment Grade Options

Investments

Viatical Settlements

Best regards,

Shirley L Schaff
Marketing Director

Special Services
Tax Advice from C.P.A.
Top Commissions

... for committed growth and security

• Ph (561)-966-6757 105 Waterway Village Court 2nd Floor