

1.) CORPORATION NAME:

Primus Telecommunications Group, Incorporated

DUE DATE: **7/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

CORPORATION SERVICE COMPANY

**Bank of America Center, 16th Floor
1111 East Main Street**

SCC ID NO: **F1386749**

RICHMOND, VA 23219

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	80,000,000
PREFER	20,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 7901 JONES BRANCH DR 900

CITY/ST/ZIP: MC LEAN, VA 22102-3316

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	PETER D AQUINO	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	7901 JONES BRANCH DR STE 900		
CITY/ST/ZIP/CO:	MCLEAN, VA 22102-3316		
NAME:	JAMES C KEELEY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CORP CONTROLLER		
ADDRESS:	7901 JONES BRANCH DR, DTE m900		
CITY/ST/ZIP/CO:	MCLEAN, VA 22102-3316		
NAME:	RICHARD RAMLALL	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP, CORP DEV		
ADDRESS:	7901 JONES BRANCH DRIVE		
CITY/ST/ZIP/CO:	900 MCLEAN, VA 22102-3316		
NAME:	STEVEN D. SCHEIWE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	7901 JONES BRANCH DRIVE		
CITY/ST/ZIP/CO:	900 MCLEAN, VA 22102-3316		
NAME:	NEIL S SUBIN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	7901 JONES BRANCH DR STE 900		
CITY/ST/ZIP/CO:	MCLEAN, VA 22102-3316		
NAME:	Andrew Day	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CEO of No. Amer		
ADDRESS:	7901 Jones Branch Drive, Suite 900		
CITY/ST/ZIP/CO:	McLean, VA 22102-3316		

NAME: Mark E Holliday TITLE: DIRECTOR ADDRESS: 7901 Jones Branch Drive, Suite 900 CITY/ST/ZIP/CO: McLean, VA 22102-3316	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: Robert M Pons TITLE: DIRECTOR ADDRESS: 7901 Jones Branch Drive, Suite 900 CITY/ST/ZIP/CO: McLean, VA 22102-3316	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: John D Filipowicz TITLE: SECRETARY ADDRESS: 7901 Jones Branch Drive, Suite 900 CITY/ST/ZIP/CO: McLean, VA 22102-3316	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: Andrea L Mancuso TITLE: ASST SECRETARY ADDRESS: 7901 Jones Branch Drive, Suite 900 CITY/ST/ZIP/CO: McLean, VA 22102-3316	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.		
/s/ JAMES C KEELEY _____ SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	JAMES C KEELEY, CORP CONTROLLER _____ PRINTED NAME AND CORPORATE TITLE	7/27/2012 _____ DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.		