

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 20, 2002 8:00 am**  
**Secretary of State**

0613898 AT

**DOCUMENT # F01000002315**

1. Entity Name  
**AGRIUM U.S. INC.**

02-20-2002 90026 033 \*\*\*150.00

Principal Place of Business      Mailing Address  
**4582 SOUTH ULSTER STREET, SUITE 1700**      **4582 SOUTH ULSTER STREET, SUITE 1700**  
**DENVER CO 80237**      **DENVER CO 80237**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business      3. Mailing Address  
**same**      **same**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number  
**91-1589568**

Applied For  
 Not Applicable

Zip      Country

Zip      Country

5. Certificate of Status Desired            **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

**C T CORPORATION SYSTEM**  
**1200 SOUTH PINE ISLAND ROAD**  
**PLANTATION FL 33324**

Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City      **FL**      Zip Code

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

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

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, 2002 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**

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>VAN BRUNT, JOHN M</b> <b>13131 LAKE FRASER DRIVE, S.E.</b> <b>CALGARY, ALBERTA, CANADA <del>00-00000</del> T2J 7E8</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <b>O'DONOGHUE, LESLIE</b> <b>13131 LAKE FRASER DRIVE, S.E.</b> <b>CALGARY, ALBERTA, CANADA <del>00-00000</del> T2J 7E8</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T</b> <b>FREEMAN, PATRICK J</b> <b>13131 LAKE FRASER DRIVE, S.E.</b> <b>CALGARY, ALBERTA, CANADA <del>00-00000</del> T2J 7E8</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>WILSON, MICHAEL M</b> <b>13131 LAKE FRASER DRIVE, S.E.</b> <b>CALGARY, ALBERTA, CANADA <del>00-00000</del> T2J 7E8</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VCD</b> <b>GEARHEARD, RICHARD L</b> <b>4582 SOUTH ULSTER STREET, SUITE 1700</b> <b>DENVER CO 80237</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>ORGILL, RANDY N</b> <b>2787 W. BULLARD AVE., SUITE 101</b> <b>FRESNO CA 93715-1168</b>	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Assistant Corp. Secretary</b> <b>Wendy L. Anderson</b> <b>4582 S. Ulster St., Suite 1700</b> <b>Denver, CO 80237</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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]*      January 31, 2002      (303) 804-4426

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #.

CR2E034 (9/01)