FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(1)

CARGILL FERTILIZER, INC.

FILED				
Jun 01	1998	8:00am		
Secre	etary c	of State		

UANGIL	L renticizen, illo:					
Principal Place of Business Mailing Address) (MANDE VALUE LIBIO INDIA DININ DININ DAGE OLARI ALANI ALANI ALANI ALANI ALANI ALANI		
8813 HIGHWAY 41 SOUTH P.O. BOX 5626 MS 26 RIVERVIEW FL 33569 MINNEAPOLIS MN 55440-5626		6		3. Date Incorporated or Qualified 02/15/1973		
US					4. FEI Number Applied For	
9 Principal Pl	ace of Business	2a. Mailing Address			59-1445393 Not Applicable 5 Codificate of Status Desired \$8.75 Additional	
21 Philippai Fi	SOC OI DUSINOSS	26			5. Certificate of Status Desired S8.75 Additional Fee Required	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
City & State City & State				7. Is this nonprofit corporation a homeowners association?		
23 Zip	Country	Zip Country			Yes X No 8. This corporation owes or has paid the current year Intangible	
24	25	⊢ ¬ ' ⊢	├ ─┐		Personal Property Tax due June 30. X Yes No	
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registered Agent	
			81	Name		
	RPORATION SYSTEM		82	Street A	Address (P.O. Box Number is Not Acceptable)	
	PUTH PINE ISLAND ROAD TI O N FL 33324		83			
PLANIA	HON FL 00024		84	City	85 Zip Code	
				,	FL [1]	
11. Pursuant 1	to the provisions of Sections 617.050; egistered agent, or both, in the State	2 and 617.1508, Florida Statutes of Florida. Such change was au	s, the above thorized by	e-named of the corpo	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered	
agent la	m tamiliar with, and accept the obliga	ations of, Section 617.0503, Flor	ida Statutes	i.		
SIGNATURE .	Signature, typed or printed name of registered age	nt and tille II applicable. (NOTE:	Registered Age	nt signature r	required when reinstating) DATE	
		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DC	DELETE	1.1 TITLE		Change Addition	
NAME	CORRIGAN, FREDRIC W.		1.2 NAME			
STREET ADDRESS	15407 MCGINTY ROAD		1.3 STREET			
CITY-ST-ZIP TITLE	WAYZATA MN 55391 DP	DELETE	1.4 CITY-S 2.1 TITLE	T-ZIP	Change Addition	
NAME	RAYMOND R. LARSON		2.2 NAME	ļ		
STREET ADDRESS	8813 HWY 41 SOUTH		2.3 STREET	ADDRESS		
CITY-ST-ZIP	RIVERVIEW FL 33569		2 4 City-5	ST-ZIP		
TITLE	V	DELETE	3.1 TITLE		Change Addition	
NAME	GORDON, H. GRAY		3.2 NAME			
STREET ADDRESS	8813 HWY 41 SOUTH		3.3 STREET	ADDRESS		
CITY-ST-ZIP	RIVERVIEW FL 33569	DELETE	3.4. CITY-5	ST-ZIP	☐ Change ☐ Addition	
TITLE NAME	VST LEFOR, GREG A	☐ DETEIE	4.3 TITLE 4.2 NAME	İ		
STREET ADORESS	8813 HWY 41 SOUTH		4.3 STREET	ADDRESS		
CITY-ST-ZIP	RIVERVIEW FL		4.4 CITY - S			
TITLE	AV	DELETE	5.1 TITLE		Change Addition	
NAME	BRUCE H. BARNETT		5.2 NAME	- 1	800002543508	
STREET ADDRESS	15407 MCGINTY RD.		5.3 STREET	ADDRESS	-06/ 02/ <u>9</u> 801008023	
CITY-ST-ZIP	WAYZATA MN 55391		5.4 CITY - S	T- ZIP	***61.25 ☐ Chance ☐ Addition	
TITLE	AS	☐ DELETE	6.1 TITLE		☐ Change ☐ Addilion	
NAME	ANNE E. CARLSON		6.2 NAME	ADADEGO	111.00	
STREET ADDRESS	15615 MCGINTY RD.W. WAYZATA MN 55391		6.3 STREET		ωa.	
14. I hereby o	certify that the information supplied w	ith this filing does not qualify for	6.4 CITY-S the exemp	tion state	d in Section 119.07(3)(i), Florida Statutes. I further certify that the information nature shall have the same legal effect as if made under oath; that I am an	
Indicated officer or	on this annual report or supplements	al annual report is true and accu	rate and the xecute this	at my sigr report as	nature shall have the same legal effect as if made under oath; that I am an required by Chapter 617, Florida Statutes; and that my name appears in	
Block 12 or Block 13 if changed, or on an attachment with an address.						