

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 829527

FILED
Mar 29, 2005
Secretary of State

Entity Name: CARGILL FERTILIZER, INC.

Current Principal Place of Business:

8813 HIGHWAY 41 SOUTH
RIVERVIEW, FL 33569 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 5626 MS 26
MINNEAPOLIS, MN 554405626

New Mailing Address:

FEI Number: 59-1445393

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: CORRIGAN, FREDRIC W.,
Address: 15407 MCGINTY ROAD
City-St-Zip: WAYZATA, MN 55391

Title: P () Delete
Name: PINNEY, STEVEN L
Address: 15615 MCGINTY RD.
City-St-Zip: WAYZATA, MN 55391

Title: VP () Delete
Name: GORDON, H. GRAY,
Address: 8813 HWY 41 SOUTH
City-St-Zip: RIVERVIEW, FL 33569

Title: VST () Delete
Name: LEFOR, GREG A
Address: 8813 HWY 41 SOUTH
City-St-Zip: RIVERVIEW, FL

Title: VP () Delete
Name: HALBACH, PATRICE H
Address: 15407 MCGINTY RD.
City-St-Zip: WAYZATA, MN 55391

Title: AS () Delete
Name: LUNDEEN, LILLIAN I
Address: 15407 MCGINTY ROAD
City-St-Zip: WAYZATA, MN 55391

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: LUMPKINS, ROBERT L
Address: 15407 MCGINTY ROAD
City-St-Zip: WAYZATA, MN 55391

Title: DIR (X) Change () Addition
Name: JOHNSON, GALEN
Address: 15407 MC GINTY RD
City-St-Zip: WAYZATA, MN 55391

Title: AS (X) Change () Addition
Name: CLEMENS, JAMES R
Address: 15407 MC GINTY RD
City-St-Zip: WAYZATA, MN 55391

Title: DIR (X) Change () Addition
Name: BASTIAENS, F. GUILLAUME
Address: 15407 MC GINTY RD
City-St-Zip: WAYZATA, MN 55391

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES R CLEMENS

AS

03/29/2005

Electronic Signature of Signing Officer or Director

Date