## **2000 UNIFORM BUSINESS REPORT (UBR)**

## **FILED** Aug 21, 2000 8:00 am Secretary of State **DOCUMENT # 852639** 1. Entity Name PCS PHOSPHATE COMPANY, INC. 08-21-2000 90216 034 \*\*\*550.00 Principal Place of Business Mailing Address 3101 GLENWOOD AVE. P. O. BOX 30321 RALEIGH NC 27612 RALEIGH NC 27622-0321 3. Mailing Address 2. Principal Place of Business 1101 Skokie Blvd. Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite 400 City & State City & State 4. FEI Number Applied For 13-3081755 Northbrook. Illinois Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 60062 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name-CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. NNE ISLAND ROAD PLANTATION FL 33324 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. CD CD ▼ Addition TITLE XX Delete TITLE Change NAME CHILDERS, CHARLES E. NAME William J. Doyle STREET ADDRESS STREET ADDRESS 122 1ST AVENUE SOUTH 1101 Skokie Blvd. Suite 400 CITY-ST-ZIP CITY-ST-ZIP SASKATOON SK 60062 Northbrook, IL ☐ Addition ☐ Delete TITLE ☐ Change TITLE HAMPTON, JOHN L.M. NAME NAME STREET ADDRESS STREET ADDRESS 122 1ST AVENUE SOUTH CITY-ST-ZIP CITY-ST-ZIP SASKATOON SK Delete ☐ Change ☐ Addition TITI F TITLE WRIGHT, THOMAS J. NAME NAME STREET ADDRESS STREET ADDRESS 3101 GLENWOOD AVE CITY-ST-ZIP CITY-ST-ZIP RALEIGH NC XX Delete ☐ Change ★ Addition TITLE TITLE HUMPHREYS, BARRY E NAME NAME Wayne R. Brownlee STREET ADDRESS 122 1ST AVENUE SOUTH STREET ADDRESS 122 1st Ave. Suite 500 CITY-ST-7IP CITY-ST-ZIP SASKATOON SK <u>Saskatoon</u> ☐ Addition □ Delete TITLE NAME REGAN, THOMAS J. JR. NAME Thomas J. Regan, Jr. STREET ADDRESS STREET ADDRESS 3101 GLENWOOD AVENUE 1101 Skokie Blvd. Suite 400 60062 Northbrook, IL CITY-ST-ZIP CITY-ST-ZIP RALEIGH NC ASD ☐ Delete TITLE Change **★** Addition NAME Joseph Podwika NAME STREET ADDRESS STREET ADDRESS 1100 Skokie Blvd. Suite 400 CITY-ST-ZIP CITY-ST-ZIP Northbrook, IL 60062

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.

Changed, or on an attachment with an address, with all other line empowered

SIGNATURE:

DECEMBELLESQUIREDOSERA PODWINA

8/16/00 (847)849-4200