

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000002359

1. Entity Name

PCS NITROGEN FERTILIZER OPERATIONS, INC.

FILED

May 03, 2001 8:00 am
Secretary of State

05-03-2001 90912 030 ***150.00

Principal Place of Business

Mailing Address

3175 LENNOX PARK BLVD., STE. 400
MEMPHIS TN 38115-4256

3175 LENNOX PARK BLVD., STE. 400
MEMPHIS TN 38115-4256

2. Principal Place of Business

1101 Skokie Boulevard

3. Mailing Address

1101 Skokie Boulevard

Suite, Apt. #, etc.

Suite 400

Suite, Apt. #, etc.

Suite 400

City & State

Northbrook, IL

City & State

Northbrook, IL

Zip

60062

Country

USA

Zip

60062

Country

USA

4. FEI Number

13-3934025

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



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

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

(NOTE: Registered Agent signature required when reinstating)

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, 2001 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 P ☐ Delete
NAME DIETZ, JAMES
STREET ADDRESS 3175 LENNOX PARK BLVD., STE. 400
CITY-ST-ZIP MEMPHIS TN 38115-4256

TITLE DP ☒ Change ☐ Addition
NAME James F. Dietz
STREET ADDRESS 1101 Skokie Blvd., Suite 400
CITY-ST-ZIP Northbrook, IL 60062

TITLE VC ☒ Delete
NAME SHAW, CHARLES C
STREET ADDRESS 3175 LENNOX PARK BLVD., STE. 400
CITY-ST-ZIP MEMPHIS TN 38115-4256

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DS ☐ Delete
NAME HAMPTON, JOHN L.M.
STREET ADDRESS 500, 122 FIRST AVENUE SOUTH
CITY-ST-ZIP SASKATOON, SASKATCHEWAN S7-K7G3

TITLE DAS ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE AT ☐ Delete
NAME BROWNLEE, WAYNE R
STREET ADDRESS 500, 122 FIRST AVENUE SOUTH
CITY-ST-ZIP SASKATOON, SASKATCHEWAN S7-K7G3

TITLE T ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE AS ☐ Delete
NAME KIRKPATRICK, ROBERT A
STREET ADDRESS 500, 122 FIRST AVENUE SOUTH
CITY-ST-ZIP SASKATOON, SASKATCHEWAN S7-K7G3

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S ☐ Delete
NAME ACREE, CABELL J III
STREET ADDRESS 3175 LENNOX PARK BLVD., STE. 400
CITY-ST-ZIP MEMPHIS TN 38115-4256

TITLE S ☒ Change ☐ Addition
NAME J. Cabell Acree, III
STREET ADDRESS 1101 Skokie Blvd., Suite 400
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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)