HILL HOW. I ILING FEE AFIED WAL I TO \$220.00													
THE CO.													
Condition of Atlanta									`.				
ANNUAL REPORT Secretary of State								1					
19986 DIVISION OF CORPORATIONS										•			- 1
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D	DOCUMENT # P26421 (8)												-
Corporation Name													
	POTASH CORPORATION OF SASKATCHEWAN SALES LIMITED												
	* * * * * * * * * * * * * * * * * * * *												
													-
Pri	Principal Place of Business Mailing Address												
500, 122 FIRST AVENUE SOUTH 500, 122 FIRST AVENUE SOUTH													
SASKATOON. SASKATCHEWAN S7K 7E5 SASKATOON. SASKATCHEWAN S7K 7							7ES			DO NOT WRITE	IN THIS SPA	ACE.	
CANADA CANADA									3. Date Incorpor	ated or Qualified	3a. Date o	f Last Repo	irt
·									10/11/198	39	03/	15/95	
	Principal Place of Business 2a. Mailing Address								4. FEI Number			Арр	olied For
21		26							58-12744	92			Applicable
ŀ	Suite, Apt. #	Suite, Apt. #, etc. Suite, Apt. #, etc.							5. Certificate of	Status Desired		\$8.75 A	
22	27											Fee Rec	
	City & State	City & State							Election Camp Trust Fund Co	-		\$5.00 Added to	
23	Zio		Country	7 70		Country				on has liability for			
24	210 S7K	763	Coorday	Zip S7K 763	30	Jooding			Florida Statuti			Uncer 3. 18	19.032,
9. Name and Address of Current Registered Agent										ddress of New R		gent	
81 Na													
ļ	C T CORPORATION SYSTEM 82 Street A								is (P.O. Box Numb	er in Not Acceptab	اما	 	
	1200 SOUTH PINE ISLAND ROAD								65 (F.O. 60X NORIO	er is not acceptac	110)		}
PLANTATION FL 33324													
						84	City			·		85 Zip C	ode
							,				FL		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Flonda Statutes, the above-named corporation submits this statement for the purpose of changing its registered of or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am													stered office
	familiar wit	ed agent, or ooth h, and accept the	i, in the State of Florida. e obligations of, Section	607.0505, Florida Stal	tutes.	me corp	roration s	ooaro	or olrectors. There	by accept the app	Official as a	adisiaiso ad	(SIR. 1 2/1)
S	GNATURE												
		Signature, typed or prin	ted name of registered agent an		(NOTE: Rec	istered Age	11 signeture	required v	when reinstatings	HANGES TO OFF	DATE	NOECTORS	: IAI 12
12		PD	OFFICERS AND	JIRECTORS		1. 1 TITLE		1	ADDITIONS/C	CHANGES TO OFF		X Change	Addition
	_		I SAM I			1.2 NAME		1					
1	NAME DOYLE, WILLIAM J. STREET ADDRESS 1920 RIDGEWOOD							32	9 Saskat	chewan (cres.	West	,
	STREET ADDRESS 1920 RIDGEWOOD CITY-ST-ZIP GLENVIEW IL				1.4 CITY - ST - ZIP				skatoon,				da
_	TITLE VD				2.1 TITLE			 				Change	Addition
NA		LACROIX, RI	ICK		·I	2.2 NAME							
STE	REET ADDRESS	2918 CALDE				2.3 STREE	T ADDRESS						
CIT	Y-ST-ZIP		Y,SASK.,CAN			2.4 CITY -:	ST - ZIP						
nr	LE J	SD	·········			3.1 TITLE		1				Change	Addition
NA	ME ~	HAMPTON,	JOHN L.M.			3.2 NAME				_	_		,
ST	REET ADORESS	842 UNIVER				3.3. STREE	T ADDRESS	315	5 Poplar	Crescen	t	_	`_
cn	Y-\$1-ZIP	SASKATOO	N SASK CANADA	<u> </u>		3.4 CITY -	ST-ZIP	Sas	skatoon,	Saskatc	newan	Cana	
TIT	LE	D				4.1 TITLE		_	. —			Change	Addition
NA		CHILDERS,				4.2 NAME		1					
1	STREET ADDRESS 102 LAKESHORE TERRACE					43 STREET ADORESS							
	CITY-ST-ZIP SASKATOON SASK CANADA					4.4 CITY - ST - ZIP		 				Change	Addition
1	NAME HUMPHREYS, BARRY E.					5.1 TITLE			سد وسو هم			Change	L_ ADDITION
	ME	I .				S.2 NAME			4 UU	10018:	Lesso I Monte de	4	
1 -	REET AOORESS		615 Braeside View			5.3 STREET ADDRESS)8/9601() いゎーーひ ろ	.	,
	CITY-ST-ZIP SASKATOON,SASK.,CAN					5.4 CITY-ST-ZIP 6.1 TITLE			***20	<u> </u>		Change	Addition
	NAME					6.2 NAME							52.1
	=						T ADORESS						761
ł	REET ADDRESS	•				6.4 CITY -		`					/
	ry-\$T-ZIP L. I do hereb	y certify that the	information supplied wi	th this filing is voluntarily	y furnished	and do	es not a	ualify to	r the exemption sta	ated in Section 119	0.07(3)(k), Flo	rida Statutes	s. I further
14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(N). Florida Statutes. I furth certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made un oath; that I am an officer or director of the corporation or the receive trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name												nade under	
	appears in	Block 12 or Blo	ck 13 if changed, or on		address.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	** B460	J.J 1113	. Judis da reguleu		J	, 11 10.11	g

SIGNATURE: John L.M. Hamptom

april 18/96

306-933-8500