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Jan 16 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S80660 (1)

1. Corporation Name
POTASH CORPORATION OF SASKATCHEWAN (FLORIDA) INC

Principal Place of Business	Mailing Address
101 E. KENNEDY BLVD. SUITE 2700 TAMPA FL 33602	101 E. KENNEDY BLVD. SUITE 2700 TAMPA FL 33602

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/17/1991

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc 22	Suite, Apt. #, etc 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

4. FEI Number: 59-3100109 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

MULLIS, HAROLD W., JR.
101 E. KENNEDY BLVD.
SUITE 2700
TAMPA FL 33602

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE (Signature & typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	☐ DELETE	11 TITLE		☐ Change ☐ Addition
NAME	SMITH, CARLOS		12 NAME		
STREET ADDRESS	1801 E. MEMORIAL BLVD.		13 STREET ADDRESS		
CITY-ST-ZIP	LAKELAND FL		14 CITY-ST-ZIP		
TITLE	AS	☐ DELETE	21 TITLE		☐ Change ☐ Addition
NAME	MULLIS, HAROLD W., JR.		22 NAME		
STREET ADDRESS	101 E. KENNEDY BLVD.		23 STREET ADDRESS		
CITY-ST-ZIP	TAMPA FL		24 CITY-ST-ZIP		
TITLE	TAS	☐ DELETE	31 TITLE		☐ Change ☐ Addition
NAME	STUART, DAVID R		32 NAME		
STREET ADDRESS	1801 E. MEMORIAL BLVD.		33 STREET ADDRESS		
CITY-ST-ZIP	LAKELAND FL		34 CITY-ST-ZIP		
TITLE		☐ DELETE	41 TITLE		☐ Change ☐ Addition
NAME			42 NAME		
STREET ADDRESS			43 STREET ADDRESS		
CITY-ST-ZIP			44 CITY-ST-ZIP		
TITLE		☐ DELETE	51 TITLE		☐ Change ☐ Addition
NAME			52 NAME		
STREET ADDRESS			53 STREET ADDRESS		
CITY-ST-ZIP			54 CITY-ST-ZIP		
TITLE		☐ DELETE	61 TITLE		☐ Change ☐ Addition
NAME			62 NAME		
STREET ADDRESS			63 STREET ADDRESS		
CITY-ST-ZIP			64 CITY-ST-ZIP		

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] 1/7/98
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

Electronic Filing # 0368745

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