

FILE NOW: FILING FEE IS \$61.25

FILED
May 08 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # 829527 (1)

1. Corporation Name
CARGILL FERTILIZER, INC.

Principal Place of Business 15407 MCGINTY ROAD WAYZATA MN 55391	Mailing Address P.O. BOX 5626 MS 26 MINNEAPOLIS MN 55440-5626
---	---



2. Principal Place of Business 21 8813 HIGHWAY 41 SOUTH	2a. Mailing Address 26	3. Date Incorporated or Qualified 02/15/1973	3a. Date of Last Report 04/16/1996
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-1445393	Applied For <input type="checkbox"/> Not Applicable
City & State 23 RIVERVIEW, FL	City & State 28	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
Zip 24 33569	Country 25 USA	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
	Zip 29	Country 30	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324		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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE DC	<input type="checkbox"/> DELETE CORRIGAN, FREDRIC W. 15407 MCGINTY ROAD WAYZATA MN 55391	1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE DP	<input type="checkbox"/> DELETE RAYMOND R. LARSON 8813 HWY 41 SOUTH RIVERVIEW FL 33569	2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE V	<input type="checkbox"/> DELETE GORDON, H. GRAY 8813 HWY 41 SOUTH RIVERVIEW FL 33569	3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE VST	<input checked="" type="checkbox"/> DELETE JERRY N. HAMMOND 8813 HWY 41 SOUTH RIVERVIEW FL 33569	4.1 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	VST GREG A. LEFOR 8813 HWY 41 SOUTH RIVERVIEW FL 33569
TITLE AV	<input type="checkbox"/> DELETE BRUCE H. BARNETT 15407 MCGINTY RD. WAYZATA MN 55391	5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE AS	<input type="checkbox"/> DELETE ANNE E. CARLSON 15815 MCGINTY RD.W. WAYZATA MN 55391	6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	

14. I do 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *Bruce H. Barnett* **BRUCE H. BARNETT** 4/23/97 612-742-6406
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0076482

CP2E037 (9/96)