

1.) CORPORATION NAME:

PCS Sales (USA), Inc.

DUE DATE: **9/30/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY
Bank of America Center, 16th Floor
1111 East Main Street**

SCC ID NO: **F1394628**

RICHMOND, VA 23219

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1101 SKOKIE BOULEVARD SUITE 400

CITY/ST/ZIP: NORTHBROOK, IL 60062

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	STEPHEN DOWDLE	
TITLE:	PRESIDENT	
ADDRESS:	1101 SKOKIE BOULEVARD # 400	
CITY/ST/ZIP/CO:	NORTHBROOK, IL 60062	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	JASON CARTER	
TITLE:	VP, FERT SALES E	
ADDRESS:	1101 SKOKIE BLVD.	
CITY/ST/ZIP/CO:	SUITE 400 NORTHBROOK, IL 60062	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	TROY ERNY	
TITLE:	VP, IND SALES	
ADDRESS:	1101 SKOKIE BLVD.	
CITY/ST/ZIP/CO:	SUITE 400 NORTHBROOK, IL 60062	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	MARK ETIENNE	
TITLE:	VP, FEED SALES	
ADDRESS:	1101 SKOKIE BLVD.	
CITY/ST/ZIP/CO:	SUITE 400 NORTHBROOK, IL 60062	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	ROBERT FELGENHAUER	
TITLE:	VP, T&D Sulphur	
ADDRESS:	1101 SKOKIE BLVD.	
CITY/ST/ZIP/CO:	SUITE 400 NORTHBROOK, IL 60062	

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LEE KNAFELC VP, HR & ADMIN 500, 122 FIRST AVENUE SOUTH SASKATOON,SK,S7K 7G3,CANADA , , FN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Chris Reynolds VP/ FERT Sales 1101 SKOKIE BOULEVARD #400 NORTHBROOK, IL 60062	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Derek Hardy VP/FERT SALES W 1101 SKOKIE BLVD. NORTHBROOK, IL 60062	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DAVE VINCENT VP, MARKETING 1101 SKOKIE BLVD. SUITE 400 NORTHBROOK, IL 60062	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SHANE WILLIAMS VP,FERT SALES S 1101 SKOKIE BLVD. SUITE 400 NORTHBROOK, IL 60062	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOSEPH A. PODWIKA SECRETARY 1101 SKOKIE BLVD. SUITE 400 NORTHBROOK, IL 60062	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WAYNE R BROWNLEE TREASURER 122 - 1ST AVE SOUTH SASKATOON,SK,S7K 7G3,CANADA , , FN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WILLIAM J. DOYLE CHAIR OF BOARD 1101 SKOKIE BLVD. SUITE 400 NORTHBROOK, IL 60062	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	BRIAN E JOHNSON ASST SECRETARY 1101 SKOKIE BLVD STE 400 NORTHBROOK, IL 60062	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROBERT A. KIRKPATRICK ASST SECRETARY 500, 122 FIRST AVE. SOUTH SASKATOON,SK,S7K 7G3,CANADA , , FN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME: Richard Harnung TITLE: DIRECTOR, US TAX ADDRESS: 1101 SKOKIE BLVD. SUITE 400 CITY/ST/ZIP/CO: NORTHBROOK, IL 60062	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: JOHN T LYNCH TITLE: ASST SECRETARY ADDRESS: 1101 SKOKIE BLVD SUITE 400 CITY/ST/ZIP/CO: NORTHBROOK, IL 60062	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ BRIAN E JOHNSON SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	BRIAN E JOHNSON, ASST SECRETARY PRINTED NAME AND CORPORATE TITLE	9/27/2012 DATE
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It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.