

SCC eFile

2013 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

213537839

1.) CORPORATION NAME:

Agrium Advanced Technologies (U.S.) Inc.

DUE DATE: **8/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX RD STE 301
GLEN ALLEN, VA**

SCC ID NO: **F1799172**

5.) STOCK INFORMATION

| CLASS | AUTHORIZED |
|--------|------------|
| COMMON | 1,000 |

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2915 ROCKY MOUNTAIN AVE

CITY/ST/ZIP: LOVELAND, CO 80538

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: | ANDREW MITTAG | |
| TITLE: | PRESIDENT | |
| ADDRESS: | 2915 ROCKY MOUNTAIN AVE | |
| CITY/ST/ZIP/CO: | LOVELAND, CO 80538 | |

| | | |
|-----------------|---|--|
| | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: | JOHN LEAL | |
| TITLE: | VP/FINANCE | |
| ADDRESS: | 2915 ROCKY MOUNTAIN AVE | |
| CITY/ST/ZIP/CO: | LOVELAND, CO 80538 | |

| | | |
|-----------------|---|-----------------------------------|
| | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: | JEFF NOVAK | |
| TITLE: | VICE PRESIDENT | |
| ADDRESS: | 2915 ROCKY MOUNTAIN AVENUE | |
| CITY/ST/ZIP/CO: | LOVELAND, CO 80538 | |

| | | |
|-----------------|---|-----------------------------------|
| | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: | SHELDON WITTE | |
| TITLE: | VICE PRESIDENT | |
| ADDRESS: | 2915 ROCKY MOUNTAIN AVENUE | |
| CITY/ST/ZIP/CO: | LOVELAND, CO 80538 | |

| | | |
|-----------------|---|-----------------------------------|
| | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: | GARY J DANIEL | |
| TITLE: | SECRE | |
| ADDRESS: | 13131 LAKE FRASER DR S.E. CALGARY, ALBERTA | |
| CITY/ST/ZIP/CO: | , , FN | |

| | | |
|-----------------|---|-----------------------------------|
| | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: | KARA L FENTON | |
| TITLE: | ASST SECRETARY | |
| ADDRESS: | 13131 LAKE FRASER DRIVE S.E. | |
| CITY/ST/ZIP/CO: | CALGARY, ALBERTA, T2J 7E8, CA | |

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/ KARA LFENTON | KARA LFENTON, | 8/14/2013 |
| SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | PRINTED NAME AND CORPORATE TITLE | DATE |
| 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. | | |