

**FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00**

**FILED**  
**May 15 1997 8:00am**  
**Secretary of State**

**PROFIT CORPORATION ANNUAL REPORT 1997**



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

**DOCUMENT # F92000000084 (5)**

1. Corporation Name  
**MISSION ENERGY COMPANY**  
 Edison Mission Energy (Formerly Mission Energy Company)



Principal Place of Business: **18101 VON KARMAN AVENUE, SUITE 1700 IRVINE CA 92612-1046 US**  
 Mailing Address: **18101 VON KARMAN AVENUE, SUITE 1700 IRVINE CA 92612-1046 US**

3. Date Incorporated or Qualified: **11/03/1992**      3a. Date of Last Report: **11/08/1996**  
 4. FEI Number: **95-4031807**      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 has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

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

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 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

TITLE	<b>DV</b>	<input type="checkbox"/> DELETE
NAME	<b>EDGE, ROBERT M</b>	
STREET ADDRESS	<b>18101 VON KARMAN AVE., SUITE 1700</b>	
CITY-ST-ZIP	<b>IRVINE CA</b>	
TITLE	<b>DP</b>	<input checked="" type="checkbox"/> DELETE
NAME	<b>MULLER, EDWARD</b>	
STREET ADDRESS	<b>18101 VON KARMAN AVE., SUITE 170</b>	
CITY-ST-ZIP	<b>IRVINE CA</b>	
TITLE	<b>DP</b>	<input type="checkbox"/> DELETE
NAME	<b>EDWARD R. MULLER</b>	
STREET ADDRESS	<b>18101 VON KARMAN AVE., #1700</b>	
CITY-ST-ZIP	<b>IRVINE CA</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	<b>Please see attachment.</b>	
1.3 STREET ADDRESS	<b>391-B Orchard Rd</b>	
1.4 CITY-ST-ZIP	<b>Singapore 238874</b>	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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

SIGNATURE: *Mortham*      DATE: **4/18/97**      (714) 798-7894

CR2E034 (9/96)

## ATTACHMENT TO FLORIDA CORPORATION ANNUAL REPORT-1997

Edison Mission Energy (formerly Mission Energy Company)

Document Number: P9200000084

Item 12 continued: (Names and Street Addresses of Each Officer and Director)

<u>Title</u>	<u>Name</u>	<u>Business Address</u>	<u>City/State/Zip</u>
D/COB	John E. Bryson	2244 Walnut Grove Ave.	Rosemead, CA 91770
D	Bryant C. Danner	2244 Walnut Grove Ave.	Rosemead, CA 91770
D/VCB	Alan J. Fohrer	2244 Walnut Grove Ave.	Rosemead, CA 91770
D/P	Edward R. Muller	18101 Von Karman Ave., Ste. 1700	Irvine, CA 92612
D/Exec.V	Robert M. Edgell	391-B Orchard Rd, Ngee Ann City	Singapore 238874
Sr.V	Georgia R. Nelson	18101 Von Karman Ave., Ste. 1700	Irvine, CA 92612
Sr.V/CFO	James V. Iaco, Jr.	18101 Von Karman Ave., Ste. 1700	Irvine, CA 92612
Sr.V	S. Daniel Melita	Lansdowne House, Berkeley Square	London, England
Sr.V/GC	S. Linn Williams	18101 Von Karman Ave., Ste. 1700	Irvine, CA 92612
V/AssocGC	Herbert A. Glaser	18101 Von Karman Ave., Ste. 1700	Irvine, CA 92612
V	Robert E. Driscoll	391-B Orchard Rd, Ngee Ann City	Singapore 238874
V	Lynn M. Gardner	18101 Von Karman Ave., Ste. 1700	Irvine, CA 92612
V	Paul R. Gillespie	18101 Von Karman Ave., Ste. 1700	Irvine, CA 92612
V	W. L. Halander	391-B Orchard Rd, Ngee Ann City	Singapore 238874
V	Gregory C. Hoppe	Southgate Complex, 40 City Road	S. Melbourne, Australia
V	Mark E. Irwin	18101 Von Karman Ave., Ste. 1700	Irvine, CA 92612
V/C	Thomas E. Legro	18101 Von Karman Ave., Ste. 1700	Irvine, CA 92612
V/Asst.S/AGC	Patricia A. Lyman	18101 Von Karman Ave., Ste. 1700	Irvine, CA 92612
V	Paul L. Multari	18101 Von Karman Ave., Ste. 1700	Irvine, CA 92612
V/T	Kevin M. Smith	18101 Von Karman Ave., Ste. 1700	Irvine, CA 92612
V	John J. Vella	18101 Von Karman Ave., Ste. 1700	Irvine, CA 92612
S	Martha A. Spikes	18101 Von Karman Ave., Ste. 1700	Irvine, CA 92612
Asst. V	Dennis R. Mielke	18101 Von Karman Ave., Ste. 1700	Irvine, CA 92612
Asst.S/AGC	Richard Lehfeldt	12500 Fair Lakes Circle #200	Fairfax, VA 22033

### Legend

Exec.V = Executive Vice President  
 Sr.V = Senior Vice President  
 V = Vice President  
 AssocGC = Associate General Counsel  
 Asst.V = Assistant Vice President  
 Asst.S = Assistant Secretary  
 AGC = Assistant General Counsel  
 T = Treasurer  
 S = Secretary  
 D = Director  
 C = Controller  
 GC = General Counsel  
 CFO = Chief Financial Officer  
 CEO = Chief Executive Officer  
 P = President  
 COB = Chairman of the Board  
 VCB = Vice Chairman of the Board  
 DGC = Deputy General Counsel

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PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # P36928

(0)

1. Corporation Name  
DEVEREAUX ENERGY COMPANY



Principal Place of Business  
18101 VON KARMAN AVENUE, SUITE 1700  
IRVINE CA 92715-1046  
US

Mailing Address  
18101 VON KARMAN AVENUE, SUITE 1700  
IRVINE CA 92612-1046  
US

3. Date Incorporated or Qualified <b>01/03/1992</b>	3a. Date of Last Report <b>04/29/1996</b>
4. FEI Number <b>33-0387737</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

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

9. Name and Address of Current Registered Agent <b>C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324</b>	10. Name and Address of New Registered Agent
	81 Name
	82 Street Address (P.O. Box Number is Not Acceptable)
	83
	84 City
	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 \_\_\_\_\_ (NOTE: Registered Agent's signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DEV EDGELL, ROBERT M.	1.1 TITLE	Please see attachment.
NAME	391B ORCHARD RD.	1.2 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	NGEE ANN CITY SI	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	PD MULLER, EDWARD R	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	18101 VON KARMAN AVE., #1700	2.2 NAME	
STREET ADDRESS	IRVINE CA	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	VT IACO, JAMES V JR	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	18101 VON KARMAN AVE., #1700	3.2 NAME	
STREET ADDRESS	IRVINE CA	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	T SMITH, KEVIN M	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	18101 VON KARMAN AVE., #1700	4.2 NAME	
STREET ADDRESS	IRVINE CA	4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	VS MELKE, DENNIS R	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	18101 VON KARMAN AVE., #1700	5.2 NAME	
STREET ADDRESS	IRVINE CA	5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	S MORTENSEN, H L	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	18101 VON KARMAN AVE., #1700	6.2 NAME	
STREET ADDRESS	IRVINE CA 92715	6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or in an attachment with an address.

SIGNATURE \_\_\_\_\_ Michelle J. Johnson 4/18/97 (714) 798-7894

CFR2E034 (9/96)