


FILED

Aug 05 1998 8:00am
Secretary of State

<div>PROFIT CORPORATION ANNUAL REPORT 1998</div> <div></div>		<div>FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS</div>		<div>Aug 05 1998 8:00am Secretary of State</div>	
<div>DOCUMENT # 855992 (4)</div> <div>1. Corporation Name THE WILLIAM LYON COMPANY</div>					
<div>Principal Place of Business ATTN: TAX DEPT P O BOX 7520 NEWPORT BEACH CA 92658-7520 US</div>			<div>Mailing Address ATTN: TAX DEPT P O BOX 7520 NEWPORT BEACH CA 92658-7520 US</div>		
<div>2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24</div>			<div>2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29</div>		
<div>3. Date Incorporated or Qualified 04/01/1983</div>			<div>4. FEI Number 33-0282796</div>		
<div>5. Certificate of Status Desired \$8.75 Additional Fee Required</div>			<div>6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees</div>		
<div>7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No</div>			<div>8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No</div>		
<div>9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324</div>			<div>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</div>		
<div>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.</div>					
<div>SIGNATURE Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when resigning) DATE</div>					
<div>12. OFFICERS AND DIRECTORS TITLE P NAME NORKAITIS, BRIAN V. STREET ADDRESS 4490 VON KARMAN CITY-ST-ZIP NEWPORT BCH CA TITLE VDS NAME FRANKEL, RICHARD E. STREET ADDRESS 4490 VON KARMAN CITY-ST-ZIP NEWPORT BEACH CA TITLE VT NAME ROBINSON, RICHARD S. STREET ADDRESS 4490 VON KARMAN CITY-ST-ZIP NEWPORT BEACH CA TITLE DC NAME LYON, WILLIAM STREET ADDRESS 4490 VON KARMAN CITY-ST-ZIP NEWPORT BEACH CA TITLE AS NAME HARDGRAVE, CYNTHIA E STREET ADDRESS 4490 VON KARMAN CITY-ST-ZIP NEWPORT BCH CA TITLE NAME STREET ADDRESS CITY-ST-ZIP</div>			<div>13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE P 1.2 NAME William Lyon 1.3 STREET ADDRESS 4490 Von Karman 1.4 CITY-ST-ZIP Newport Beach, CA 92660 2.1 TITLE Sr. VP/Treas/Secty 2.2 NAME Richard S. Robinson 2.3 STREET ADDRESS 4490 Von Karman 2.4 CITY-ST-ZIP Newport Beach, CA 92660 3.1 TITLE VP/CFO/Asst. Secty 3.2 NAME Cynthia E. Hardgrave 3.3 STREET ADDRESS 4490 Von Karman 3.4 CITY-ST-ZIP Newport Beach, CA 92660 4.1 TITLE Asst. VP 4.2 NAME Dixie M. Hesson 4.3 STREET ADDRESS 4490 Von Karman 4.4 CITY-ST-ZIP Newport Beach, CA 92660 5.1 TITLE Asst. Secty. 5.2 NAME Michael D. Grubbs 5.3 STREET ADDRESS 4490 Von Karman 5.4 CITY-ST-ZIP Newport Beach, CA 92660 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP</div>		

CR2E034 (5/98)

SIGNATURE:

R. S. ROBINSON VICE PRES. 7/24/98 (949) 833-3600