

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

FILED
Apr 23 1998 8:00am
Secretary of State

 <p>PROFIT CORPORATION ANNUAL REPORT 1998</p>		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P32772 (6)
 1. Corporation Name
EL DORADO ENERGY COMPANY

Principal Place of Business 18101 VON KARMAN AVE., SUITE 400 SUITE 1700 IRVINE CA 92715-1046 US	Mailing Address 18101 VON KARMAN AVE., SUITE 400 SUITE 1700 IRVINE CA 92715-1046 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 02/11/1991
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number 33-0395469
22. City & State	27. City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
24. 92612-1046	29. 92612-1046	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" 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
	85. Zip Code FL

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 signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	Please see attachment.
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME	DVS
STREET ADDRESS		2.3 STREET ADDRESS	Martha A. Spikes
CITY-ST-ZIP		2.4 CITY-ST-ZIP	18101 Von Karman Ave. #1700 Irvine, CA 92612-1046
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME	DV
STREET ADDRESS		3.3 STREET ADDRESS	Paul Gillespie
CITY-ST-ZIP		3.4 CITY-ST-ZIP	18101 Von Karman Ave., #1700 Irvine, CA 92612-1046
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME	DVT
STREET ADDRESS		4.3 STREET ADDRESS	Deborah L. Gronvold
CITY-ST-ZIP		4.4 CITY-ST-ZIP	18101 Von Karman Ave., #1700 Irvine, CA 92612-1046
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	V
STREET ADDRESS		5.3 STREET ADDRESS	Dennis R. Mielke
CITY-ST-ZIP		5.4 CITY-ST-ZIP	18101 Von Karman Ave., #1700 Irvine, CA 92612-1046
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME	VGC
STREET ADDRESS		6.3 STREET ADDRESS	Mary Ellen Olson
CITY-ST-ZIP		6.4 CITY-ST-ZIP	18101 Von Karman Ave., #1700 Irvine, CA 92612-1046

14. I 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: **Martha A. Spikes** *Martha A. Spikes* 4/15/98 (714) 798-7895

CF2E034 (10/97)

ATTACHMENT TO FLORIDA CORPORATION ANNUAL REPORT-1998

El Dorado Energy Company
Document Number: F32772

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

Title	Name	Business Address	City/State/Zip
D/P	Georgia R. Nelson	18101 Von Karman Ave., Ste. 1700	Irvine, CA 92612
D/V	Paul R. Gillespie	18101 Von Karman Ave., Ste. 1700	Irvine, CA 92612
D/V/T	Deborah L. Gronvold	18101 Von Karman Ave., Ste. 1700	Irvine, CA 92612
D/V/S	Martha A. Spikes	18101 Von Karman Ave., Ste. 1700	Irvine, CA 92612
D	S. Linn Williams	18101 Von Karman Ave., Ste. 1700	Irvine, CA 92612
V	Bruce L. Franco	12500 Fair Lakes Circle, #200	Fairfax, VA 22033
V/AGC	Herbert A. Glaser	555 Twelfth Street, NW. #640	Wash. D.C. 20004
V	Lori L. Garrett	18101 Von Karman Ave., Ste. 1700	Irvine, CA 92612
V	Mark E. Irwin	18101 Von Karman Ave., Ste. 1700	Irvine, CA 92612
V	Dennis R. Mielke	18101 Von Karman Ave., Ste. 1700	Irvine, CA 92612
V/GC	Mary Ellen Olson	18101 Von Karman Ave., Ste. 1700	Irvine, CA 92612
Asst. S	Michelle J. Johnson	18101 Von Karman Ave., Ste. 1700	Irvine, CA 92612
Asst. T	Kenneth J. Ziegler	18101 Von Karman Ave., Ste. 1700	Irvine, CA 92612

Legend

EV = Executive Vice President
 Sr.V = Senior Vice President
 V = Vice President
 Asst.T = Assistant Treasurer
 Asst.V = Assistant Vice President
 Asst.S = Assistant Secretary
 AGC = Assistant General Counsel
 T = Treasurer
 S = Secretary
 D = Director
 C = Contoller
 GC = General Counsel
 CFO = Chief Financial Officer
 P = President
 GM = General Manager