

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**May 10, 1999 8:00 am**  
**Secretary of State**

05-10-1999 90242 001 \*\*\*150.00

**DOCUMENT # P36928**

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 92715-1046  
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**01/03/1992**

4. FEI Number

**33-0387737**

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 owes the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

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 **V** ☐ DELETE  
NAME **MIELKE, DENNIS R**  
STREET ADDRESS **18101 VON KARMAN AVE., #1700**  
CITY-ST-ZIP **IRVINE CA**

TITLE **PD** ☒ DELETE  
NAME **NELSON, GEORGIA R**  
STREET ADDRESS **18101 VON KARMAN AVE, #1700**  
CITY-ST-ZIP **IRVINE CA 92612**

TITLE **DVS** ☐ DELETE  
NAME **SPIKES, MARTHA A**  
STREET ADDRESS **18101 VON KARMAN AVE, #1700**  
CITY-ST-ZIP **IRVINE CA 92612**

TITLE **DV** ☐ DELETE  
NAME **GILLESPIE, PAUL**  
STREET ADDRESS **18101 VON KARMAN AVE, 1700**  
CITY-ST-ZIP **IRVINE CA 92612**

TITLE **DVT** ☒ DELETE  
NAME **GRONVOLD, DEBORAH L**  
STREET ADDRESS **18101 VON KARMAN AVE, #1700**  
CITY-ST-ZIP **IRVINE CA 92612**

TITLE **V** ☐ DELETE  
NAME **IRWIN, MARK**  
STREET ADDRESS **18101 VON KARMAN AVE, #1700**  
CITY-ST-ZIP **IRVINE CA 92612**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☒ Addition  
2.2 NAME **James V. Iaco, Jr.**  
2.3 STREET ADDRESS **18101 Von Karman Avenue, #1700**  
2.4 CITY-ST-ZIP **Irvine, CA 92612-1046**

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☒ Addition  
5.2 NAME **D/V/T**  
5.3 STREET ADDRESS **Kevin M. Smith**  
5.4 CITY-ST-ZIP **18101 Von Karman Avenue, #1700**  
**Irvine, CA 92612-1046**

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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, with all other like empowered.

SIGNATURE: **Martha A. Spikes** **Martha A. Spikes** **4/22/99** **949/798-7895**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/98)

058334

537883-902-42-1  
#P36928

## ATTACHMENT TO FLORIDA CORPORATION ANNUAL REPORT-1999

Devereaux Energy Company  
Document Number: P36928

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	Raymond W. Vickers	18101 Von Karman Ave., Ste. 1700	Irvine, CA 92612
D/P	James V. Iaco, Jr.	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	Kevin M. Smith	18101 Von Karman Ave., Ste. 1700	Irvine, CA 92612
D/V/S	Martha A. Spikes	18101 Von Karman Ave., Ste. 1700	Irvine, CA 92612
V	Bruce L. Franco	12500 Fair Lakes Circle, #200	Fairfax, VA 22033
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/AGC	Herbert A. Glaser	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

V = Vice President  
Asst. T = Assistant Treasurer  
Asst. S = Assistant Secretary  
AGC = Assistant General Counsel  
T = Treasurer  
S = Secretary  
D = Director  
GC = General Counsel  
P = President