


FILE NOW: Fee after May 1, will be \$588.75

AAA

LIMITED LIABILITY COMPANY ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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FILING FEE	Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee
\$ 203.75	Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company
DOCUMENT # M95000000082
 THE RITZ-CARLTON HOTEL COMPANY, L.L.C., L. C.
 1013 CENTRE ROAD
 WILMINGTON DE 19805

FILED

97 MAY -1 PM 4:08

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

1a. Principal Place of Business Address
 1013 CENTRE ROAD
 WILMINGTON DE 19805

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a.

2. Principal Place of Business 10400 FERNWOOD ROAD	2a. Mailing Address
Suite, Apt. #, etc. DEPT. 924.13	Suite, Apt. #, etc.
City & State BETHESDA, MD.	City & State
Zip 20817	Country MONTGOMERY

3. Date Organized or Qualified 04/11/1995	3a. State of Formation DE
4. FEI Number 58-2168815	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Date of Last Report 03/19/1996	6. Certificate of Status Desired <input type="checkbox"/> Additional Fee Required

7. Name and Address of Current Registered Agent

CORPORATION SERVICE, COMPANY
 1201 HAYS STREET
 TALLAHASSEE FL 32301

8. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 Suite, Apt. #, etc. **200002171812-5**
 City **FL**

-05/08/97--01118--010
 ****203.75 ****203.75
 Zip Code

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	JOHNSON, WILLIAM B	3414 PEACHTREE ROAD N.E.,	ATLANTA GA
MGR	STEPHENS, J. RICHARD	3414 PEACHTREE ROAD N.E.,	ATLANTA GA
MGR	WILDMAN, JAMES H	120 W. 45TH STREET	NEW YORK NY
MGR	SULLIVAN, JAMES M	ONE MARRIOTT DRIVE	WASHINGTON DC
MGR	RYAN, J. JOSEPH	ONE MARRIOTT DRIVE	WASHINGTON DC
MGR	STEIN, MICHAEL A	ONE MARRIOTT DRIVE	WASHINGTON DC

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE: JEFF B. STANT *Jeff B. Stant* **APR 23 1997** (301) 380-5363

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER