

CT CORPORATION SYSTEM

F010000000668

CORPORATION(S) NAME

KSL Development Corporation

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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-02/05/01--01037--020

*****70.00 *****70.00

<input checked="" type="radio"/> Profit	<input type="radio"/> Amendment	<input type="radio"/> Merger
<input checked="" type="radio"/> Nonprofit		
<input type="radio"/> Foreign	<input type="radio"/> Dissolution/Withdrawal	<input type="radio"/> Mark
	<input type="radio"/> Reinstatement	
<input type="radio"/> Limited Partnership	<input type="radio"/> Annual Report	<input type="radio"/> Other
<input type="radio"/> LLC	<input type="radio"/> Name Registration	<input type="radio"/> Change of RA
	<input type="radio"/> Fictitious Name	<input type="radio"/> UCC
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<input type="radio"/> Call When Ready	<input type="radio"/> Call If Problem	<input type="radio"/> After 4:30
<input checked="" type="radio"/> Walk In	<input type="radio"/> Will Wait	<input checked="" type="radio"/> Pick Up
<input type="radio"/> Mail Out		

Name _____
Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____

2/5/01

Order#: 3535475

M.S.

Ref#:

Amount: \$

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

RECEIVED
01 FEB -5 AM 11:09
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA*

1. KSL DEVELOPMENT CORPORATION

(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. Delaware

(State or country under the law of which it is incorporated)

3. 33-0731709

(FEI number, if applicable)

4. November 21, 1996

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. February 8, 2001

(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 55-880 PGA Blvd., La Quinta, CA 92253

(Current mailing address)

8. Real estate construction and development

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. **Name and street address of Florida registered agent:** (P.O. Box or Mail Drop Box **NOT** acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida, 33324

(Zip code)

10. **Registered agent's acceptance:**

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

C T Corporation System

Connie Bryan Connie Bryan, Special Asst. Secy.

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors: (Street address **ONLY** - P.O. Box **NOT** acceptable)

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Michael S. Shannon

Address: 55-880 PGA Blvd,
La Quinta, CA 92253

Director: Larry E. Lichliter

Address: 55-880 PGA Blvd.,
La Quinta, CA 92253

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: see attached list of officers

Address: _____

Vice President: _____

Address: _____

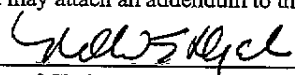
Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Nola S. Dyal, Vice President
(Typed or printed name and capacity of person signing application)

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TALLAHASSEE, FLORIDA

KSL DEVELOPMENT CORPORATION

<u>OFFICE(S)</u>	<u>NAME</u>	<u>ADDRESS</u>
President	President	55-880 PGA Blvd. La Quinta, CA 92253
Executive Vice President	Michael S. Shannon	55-880 PGA Blvd. La Quinta, CA 92253
Vice President, Chief Financial Officer and Treasurer	Eric C. Resnick	55-880 PGA Blvd. La Quinta, CA 92253
Vice President, General Counsel and Secretary	Nola S. Dyal	55-880 PGA Blvd. La Quinta, CA 92253
Senior Vice President of Finance and Operations	William J. Dodds	55-880 PGA Blvd. La Quinta, CA 92253
Senior Vice President of Planning and Development	David K. Robbins	55-880 PGA Blvd. La Quinta, CA 92253
Vice President of Land Acquisitions and Dispositions	S. Chevis Hosea	55-880 PGA Blvd. La Quinta, CA 92253
Vice President of Sales and Marketing	F. Michael Wiles	55-880 PGA Blvd. La Quinta, CA 92253
Vice President of Renovations and Construction	Gregory M. Burkhardt	55-880 PGA Blvd. La Quinta, CA 92253
Controller	Robert B. Craik	55-880 PGA Blvd. La Quinta, CA 92253
Assistant Controller	Samuel J. Barton	55-880 PGA Blvd. La Quinta, CA 92253
Assistant Secretary	Barbara Larsh	55-880 PGA Blvd. La Quinta, CA 92253

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TALLAHASSEE, FLORIDA

Office of the Secretary of State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "KSL DEVELOPMENT CORPORATION" IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTIETH DAY OF JANUARY, A.D. 2001.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

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01 FEB -5 PM 1:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2686345 8300

010049295

Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 0945076

DATE: 01-30-01