## 2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # F93000005952 May 04, 2000 8:00 am Secretary of State 1. Entity Name KSL FLORIDA HOLDINGS, INC. 05-04-2000 90140 025 \*\*\*150.00 Mailing Address Principal Place of Business 56-140 PGA BLVD 56-140 PGA BLVD LA QUINTA CA 92253-4600 LA QUINTA CA 92253 3. Mailing Address 2. Principal Place of Business 55-880 PGA BIVd. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 33-0591436 OA a Quinta Not Applicable \$8:75 Additional Country Zip 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition ☐ Change DVAT ☐ Delete TITLE NAME SHANNON, MICHAEL S STREET ADDRESS 56-140 PGA BLVD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LA QUINTA CA 92253 Change ☐ Addition DV ☐ Delete TITLE TITLE LICHLITER, LARRY E NAME STREET ADDRESS STREET ADDRESS 56-140 PGA BLVD CITY-ST-7/P CITY-ST-ZIE LA QUINTA CA 92253 ☐ Addition ☐ Change ☐ Delete TITLE TITLE DYAL, NOLA S. NAME NAME STREET ADDRESS STREET ADDRESS 56-140 PGA BLVD CITY-ST-ZIP CITY-ST-ZIP LA QUINTA CA 92253 ☐ Addition Change ☐ Delete TITLE TITLE NAME PAIGE, JOEL NAME STREET ADDRESS STREET ADDRESS 4400 NW 87TH AVENUE CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33178** Change TITLE VCFOT ☐ Addition Delete TITLE NAME SAER, JOHN K JR NAME STREET ADDRESS STREET ADDRESS 56-140 PGA BLVD CITY-ST-ZIP CITY-ST-7IP LA QUINTA CA 92253 Change ☐ Addition □ Delete TITLE TITLE NAME

13. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attackment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-7IP

SIGNATURE: QUY SURVING

STREET ADDRESS

CITY-ST-ZIP

Executive Vice President 4/28/00 1760) 56+800