

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 08, 2002 8:00 am
Secretary of State

05-08-2002 90030 011 ***150.00

DOCUMENT # F98000005622

1. Entity Name

KSL FLORIDA DEVELOPMENT CORPORATION

Principal Place of Business

**4400 N.W. 87TH AVENUE
 MIAMI FL 33178**

Mailing Address

**55-880 PGA BLVD
 LA QUINTA CA 92253
 US**

2. Principal Place of Business

3. Mailing Address

50905 Avenida Bermudas

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

La Quinta, CA

4. FEI Number

33-0824227

Applied For

Not Applicable

Zip

Country

92253

Country

USA

5. Certificate of Status Desired

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION FL 33324**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DALECIO, SCOTT M 55-880 PGA BLVD LA QUINTA CA 92253	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVPD SHANNON, MICHAEL S 55-880 PGA BLVD LA QUINTA CA 92253	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVPD LICHLITER, LARRY E 55-880 PGA BLVD LA QUINTA CA 92253	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EPT RESNICK, ERIC C 55-880 PGA BLVD LA QUINTA CA 92253	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS DYAL, NOLA S 55-880 PGA BLVD LA QUINTA CA 92253	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS LYNCH, KIMBERLY F 55-880 PGA BLVD LA QUINTA CA 92253	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 50905 Avenida Bermudas La Quinta, CA 92253
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 50905 Avenida Bermudas La Quinta, CA 92253
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 50905 Avenida Bermudas La Quinta, CA 92253

13. 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 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 attachment with an address, with all other like empowered.

SIGNATURE:

Kimberly F. Lynch
Kimberly F. Lynch

4/30/02

Date

(760) 564-8008

Daytime Phone #

CR2E034 (9/01)