

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F12000004099

FILED
Mar 31, 2014
Secretary of State
CC8039981077

Entity Name: RYMAN HOSPITALITY PROPERTIES, INC.

Current Principal Place of Business:

ONE GAYLORD DRIVE
NASHVILLE, TN 37214

Current Mailing Address:

ONE GAYLORD DRIVE
NASHVILLE, TN 37214

FEI Number: 73-0664379

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 US

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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title SECRETARY
Name LYNN, SCOTT J
Address ONE GAYLORD DRIVE
City-State-Zip: NASHVILLE TN 37214

Title PRESIDENT, DIRECTOR
Name REED, COLIN V
Address ONE GAYLORD DRIVE
City-State-Zip: NASHVILLE TN 37214

Title DIRECTOR
Name BENDER, MICHAEL J
Address ONE GAYLORD DRIVE
City-State-Zip: NASHVILLE TN 37214

Title VP, TREASURER
Name FIORAVANTI, MARK
Address ONE GAYLORD DRIVE
City-State-Zip: NASHVILLE TN 37214

Title DIRECTOR
Name GAYLORD, EDWARD K
Address ONE GAYLORD DRIVE
City-State-Zip: NASHVILLE TN 37214

Title DIRECTOR
Name HORN, RALPH
Address ONE GAYLORD DRIVE
City-State-Zip: NASHVILLE TN 37214

Title DIRECTOR
Name LEVINE, ELLEN
Address ONE GAYLORD DRIVE
City-State-Zip: NASHVILLE TN 37214

Title DIRECTOR
Name PRATHER, ROBERT S. JR.
Address ONE GAYLORD DRIVE
City-State-Zip: NASHVILLE TN 37214

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: SCOTT J. LYNN

SECRETARY & VP

03/31/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name ROSE, MICHAEL D
Address ONE GAYLORD DRIVE
City-State-Zip: NASHVILLE TN 37214

Title DIRECTOR
Name ROTH, MICHAEL I
Address ONE GAYLORD DRIVE
City-State-Zip: NASHVILLE TN 37214