2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 817932

1. Entity Name

INTER-CONTINENTAL HOTELS CORPORATION

#2900 ATLANTA GA 30346		Mailing Address 3 RAVINIA DRIVE #2900 ATLANTA GA 30346 US							
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE II	N THIS SPAC	CE		
City & State		City & State		4. F	El Number 13-1553240		Applied For Not Applicable		
Zip	Country	Zip	Country	5. 0	Certificate of Status Desired		.75 Addit	tional	
	6. Name and Address of Current Re	gistered Agent			7. Name and Address of New Registered Agent				
CT CORPORATION SYSTEM				Name					
1200	S. PINE ISLAND ROAD ITATION FL 33324	Street Address		dress (P.O. B	ss (P.O. Box Number is Not Acceptable)				
100	THION I E USSET		City			FL	Zip Code		
2 The above	named entity submits this statement for t	ho purpose of changing its	registered office or	ragistared ag	ant or both in the State of Florid				
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered agent and title if applicable.) FILE NOW!!! FE				50.00	10. Election Campaign Finan Trust Fund Contribution.	DATE cing		D May Be to Fees	
11.	OFFICERS AND D	IRECTORS	12.	AE	DITIONS/CHANGES TO OFFICE	ERS AND DI	RECTORS	IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ARASI, THOMAS 3 RAVINIA DR STE 2900 ATLANTA GA 30346-2149	∠ Delete	TITLE NAME SYREET ADDRESS CITY-SY-ZIP	The	thard Solomons ee Ravinia Drive LANTA, GA 36346] Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HILL, ROBERT D 3 RAVINIA DRIVE - STE 2900 ATLANTA GA 30346	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	78	omer Torres Tree Ravinic Dr. ATLANTAIGA 3034] Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEWIS, W D 3 RAVINIA DRIVE - STE 2900 ATLANTA GA 30346	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		ames kacena hree Ravinia Dri ATLANTA, GA 300		Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SWEETWOOD, JOHN T 3 RAVINIA DR STE 2900 ATLANTA GA 30346-2149	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP] Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D CHITTY, ROBERT J 3 RAVINIA DR STE 2900 ATLANTA GA 30346-2149	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FORTUNA, JULIAN 3 RAVINIA DR STE 2900 ATLANTA GA 30346-2149	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				_ Change	☐ Addition	

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.

212-852-6415

2/14/01

Daytime Phone #

FILED

Feb 28, 2001 8:00 am Secretary of State

02-28-2001 90079 047 ***150.00