2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2005
Secretary of State

DOCUMENT# 817932

Entity Name: INTER-CONTINENTAL HOTELS CORPORATION

Current Principal Place of Business:

3 RAVINIA DRIVE
#2900
ATLANTA, GA 30346 US

New Principal Place of Business:

Current Mailing Address:

3 THREE RAVINIA DRIVE
#2900, C/O TAX DEPT
ATLANTA, GA 30346 US

New Mailing Address:

FEI Number: 13-1553240 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	DSVP	( ) Delete
Name:	KOWALESKI, RICK	
Address:	THREE RAVINIA DRIVE	
City-St-Zip:	ATLANTA, GA 30346	
Title:	DCOO	( ) Delete
Name:	MURRAY, THOMAS	
Address:	THREE RAVINIA DR	
City-St-Zip:	ATLANTA, GA 30346	
Title:	AS	( ) Delete
Name:	MEYER-ROBERTS, BARBARA	
Address:	747 THIRD AVE 26TH FL	
City-St-Zip:	NEW YORK, NY 10017	
Title:	DVPT	( ) Delete
Name:	CHITTY, ROBERT J	
Address:	3 RAVINIA DR STE 2900	
City-St-Zip:	ATLANTA, GA 303462149	
Title:	DP	( ) Delete
Name:	PORTER, STEVAN	
Address:	3 RAVINIA DRIVE	
City-St-Zip:	ATLANTA, GA 30346	
Title:	DSVP	( ) Delete
Name:	JACKMAN, ROBERT	
Address:	3 RAVINIA DRIVE	
City-St-Zip:	ATLANTA, GA 30346	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: BARBARA MEYER-ROBERTS AS 04/28/2005

Electronic Signature of Signing Officer or Director — Date