## 2005 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

## Apr 22, 2005 08:00 AM Secretary of State DOCUMENT # F01000005065 1. Entity Nan GAYLORDENTERTAINMENT COMPANY Principal Place of Business Mailing Address ONE GAYLORD DRIVE NASHVILLE TN 37214 ONE GAYLORD DRIVE NASHVILLE TN 37214 2. Principal Place of Business 3. Mailing Address Suite Apt # etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) Applied For City & State City & State 4. FEI Number 73-0664379 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name NRAI SERVICES INC Street Address (P.O. Box Number is Not Acceptable) 526 E PARK AVE TALLAHASSEE FL 32301-2525 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 9. Election Campaign Financing After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State \_ OFFICERS AND DIRECTORS 10, ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11 THE CD Delete TITLE ☐ Change ☐ Addition NAME ROSE, MICHAEL D NAME U00000325054 ONE GAYLORD DRIVE STREET ADDRESS STREET ADDRESS 04/22/05-80117-021 150.00 NASHVILLE TN 37214 CITY-ST-71P CITY-ST-ZIP PD Change THE ☐ Delete Tritle ☐ Addition NAME REED, COLIN V NAME STREET ADDRESS ONE GAYLORD DRIVE STREET ADDRESS CITY-ST-ZIP NASHVILLE TN 37214 CITY-ST-ZIP Delete Change ☐ Addition TITLE VCFO DUE NAME KLOEPPEL, DAVID C STREET ADDRESS ONE GAYLORD DRIVE STREET ADDRESS CITY-ST 7(P CdY-S1-7P NASHVILLE TN 37214 DITE ☐ Delete Change Addition Tritt SEVIGNY, JAY NAME NAME ONE GAYLORD DRIVE STREET ADDRESS STREET ADDRESS CITY-SI-ZIP NASHVILLE TN 37214 CHY-ST-ZP ☐ Delete ☐ Change ☐ Addition FIORAVANTI, MARK NAME NAME ONE GAYLORD DRIVE STREET ADDRESS STREET ADDRESS NASHVILLE TN 37214 CITY-ST-7/P CITY-ST-ZIP TITLE Delete HILE Change ☐ Addition TODD, CARTER R NAME NAME ONE GAYLORD DRIVE STREET ADDRESS STREET ADDRESS NASHVILLE TN 37214

FILED

SIGNATURE

CLTY-ST-ZIP

12. Thereby 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 10 or Block 11 if

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