

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000005065

FILED  
Apr 12, 2011  
Secretary of State

**Entity Name:** GAYLORD ENTERTAINMENT COMPANY

**Current Principal Place of Business:**

ONE GAYLORD DRIVE  
NASHVILLE, TN 37214

**New Principal Place of Business:**

**Current Mailing Address:**

ONE GAYLORD DRIVE  
NASHVILLE, TN 37214

**New Mailing Address:**

**FEI Number:** 73-0664379

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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

**OFFICERS AND DIRECTORS:**

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

Title: DCEO  
Name: REED, COLIN V  
Address: ONE GAYLORD DRIVE  
City-St-Zip: NASHVILLE, TN 37214

Title: PCOO  
Name: KLOEPPPEL, DAVID C  
Address: ONE GAYLORD DRIVE  
City-St-Zip: NASHVILLE, TN 37214

Title: SVP  
Name: MARADIK, RICHARD A  
Address: ONE GAYLORD DRIVE  
City-St-Zip: NASHVILLE, TN 37214

Title: CFO  
Name: FIORAVANTI, MARK  
Address: ONE GAYLORD DRIVE  
City-St-Zip: NASHVILLE, TN 37214

Title: EVPS  
Name: TODD, CARTER R  
Address: ONE GAYLORD DRIVE  
City-St-Zip: NASHVILLE, TN 37214

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: CARTER R. TODD

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04/12/2011

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date