

1.) CORPORATION NAME:

**InterContinental Hotels Group Resources, Inc.**

DUE DATE: **8/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM  
4701 COX RD STE 301  
GLEN ALLEN, VA**

SCC ID NO: **F1350729**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	5,000
PREFER	30,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: THREE RAVINIA DR STE 100  
ATTN: LAW DEPT

CITY/ST/ZIP: ATLANTA, GA 30346

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	KIRK KINSELL	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	THREE RAVINIA DRIVE		
CITY/ST/ZIP/CO:	STE 100 ATLANTA, GA 30346		
NAME:	Robert J Chitty	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	Senior VP		
ADDRESS:	Three Ravinia Drive		
CITY/ST/ZIP/CO:	Suite 100 Atlanta, GA 30346-2149		
NAME:	RANDALL HAMMER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP/Secretary		
ADDRESS:	THREE RAVINIA DRIVE		
CITY/ST/ZIP/CO:	STE 100 ATLANTA, GA 30346		
NAME:	Homero M Torres	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP/Asst Secy		
ADDRESS:	Three Ravinia Drive		
CITY/ST/ZIP/CO:	Suite 100 Atlanta, GA 30346		
NAME:	Robert C Gunkel	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	Three Ravinia Drive		
CITY/ST/ZIP/CO:	Suite 100 Atlanta, GA 30346		

NAME: Robert J Morse TITLE: Senior VP ADDRESS: Three Ravinia Drive Suite 100 CITY/ST/ZIP/CO: Atlanta, GA 30346	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: James F Anhut TITLE: Senior VP ADDRESS: Three Ravinia Drive Suite 100 CITY/ST/ZIP/CO: Atlanta, GA 30346	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: Joel M Eisemann TITLE: Senior VP ADDRESS: Three Ravinia Drive Suite 100 CITY/ST/ZIP/CO: Atlanta, GA 30346	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.		
/s/ RANDALL HAMMER SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	RANDALL HAMMER, VP/Secretary PRINTED NAME AND CORPORATE TITLE	8/28/2013 DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.		