

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G79500

Entity Name: CRYOLIFE, INC.

Current Principal Place of Business:

1655 ROBERTS BLVD. N.W.
KENNESAW, GA 30144

Current Mailing Address:

1655 ROBERTS BLVD. N.W.
KENNESAW, GA 30144 US

FEI Number: 59-2417093

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NATIONAL CORPORATE RESEARCH, LTD., INC.
155 OFFICE PLAZA DRIVE
TALLAHASSEE, FL 32301 US

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

Officer/Director Detail :

Title PD
Name MACKIN, JAMES P
Address 1655 ROBERTS BLVD. N.W.
City-State-Zip: KENNESAW GA 30144

Title D
Name MCCALL, RONALD D
Address 220 E MADISON ST, STE 500
City-State-Zip: TAMPA FL 33602

Title D
Name ELKINS, RONALD C
Address 1655 ROBERTS BLVD. N.W.
City-State-Zip: KENNESAW GA 30144

Title SEC
Name WEITKAMP, ROGER T
Address 1655 ROBERTS BLVD. N.W.
City-State-Zip: KENNESAW GA 30144

Title D
Name MORGAN, HARVEY
Address 1655 ROBERTS BLVD NW
City-State-Zip: KENNESAW GA 30144

Title VP
Name LEE, D. ASHLEY
Address 1655 ROBERTS BLVD NW
City-State-Zip: KENNESAW GA 30144

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: ROGER T. WEITKAMP

ASSISTANT SECRETARY 01/15/2015

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date