### **2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# G79500

Entity Name: CRYOLIFE, INC.

FILED
Jan 13, 2014
Secretary of State
CC7959431262

## **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: Yes

# Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET 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 Title I

Name ANDERSON, STEVEN G Name MCCALL, RONALD D

Address 1655 ROBERTS BLVD. N.W. Address 220 E MADISON ST, STE 500

City-State-Zip: KENNESAW GA 30144 City-State-Zip: TAMPA FL 33602

Title D Title SEC

NameELKINS, RONALD CNameGABBERT, SUZANNE KAddress1655 ROBERTS BLVD. N.W.Address1655 ROBERTS BLVD. N.W.City-State-Zip:KENNESAW GA 30144City-State-Zip:KENNESAW GA 30144

Title D Title VP

Name MORGAN, HARVEY Name LEE, D. ASHLEY

Address 1655 ROBERTS BLVD NW Address 1655 ROBERTS BLVD NW
City-State-Zip: KENNESAW GA 30144 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: SUZANNE K. GABBERT

CORPORATE SECRETAR 01/13/2014

Electronic Signature of Signing Officer/Director Detail

Date