

2021 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:

COGENCY GLOBAL INC.
115 NORTH CALHOUN ST.
SUITE 4
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 PRESIDENT, DIRECTOR, CEO
Name MACKIN, J. PATRICK
Address 1655 ROBERTS BLVD. N.W.
City-State-Zip: KENNESAW GA 30144

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

Title GC/CORP SEC/SR VP/CHIEF COMPLIANCE OFFICER
Name HOLLOWAY, JEAN F
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 CFO, COO, EVP
Name LEE, D. ASHLEY
Address 1655 ROBERTS BLVD NW
City-State-Zip: KENNESAW GA 30144

Title DIRECTOR
Name ACKERMAN, THOMAS F
Address 1655 ROBERTS BLVD NW
City-State-Zip: KENNESAW GA 30144

Title DIRECTOR
Name BEVEVINO, DANIEL J.
Address 1655 ROBERTS BLVD NW
City-State-Zip: KENNESAW GA 30144

Title DIRECTOR
Name SALVESON, JON W.
Address 1655 ROBERTS BLVD NW
City-State-Zip: KENNESAW GA 30144

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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: JEAN HOLLOWAY

GC/CORP SEC/SR
VP/CHIEF COMPLIANCE
OFFICER

04/20/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP, CHIEF ACCOUNTING OFFICER
Name HORTON, AMY D.
Address 1655 ROBERTS BLVD. N.W.
City-State-Zip: KENNESAW GA 30144

Title DIRECTOR
Name BORGSTROM, MARNA P
Address 1655 ROBERTS BLVD. N.W.
City-State-Zip: KENNESAW GA 30144