

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 844085

FILED
May 02, 2006
Secretary of State

Entity Name: TISSUE BANKS INTERNATIONAL, INCORPORATED

Current Principal Place of Business:

815 PARK AVE.
BALTIMORE, MD 21201

New Principal Place of Business:

Current Mailing Address:

815 PARK AVE.
BALTIMORE, MD 21201

New Mailing Address:

FEI Number: 52-1290067 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: COLE, GERALD
Address: 815 PARK AVE
City-St-Zip: BALTIMORE, MD 21201

Title: D () Delete
Name: BOURNE, KENNETH JR
Address: TWO HOPKINS PLAZA, 2ND FLOOR
City-St-Zip: BALTIMORE, MD 21201

Title: T () Delete
Name: LEIMKUHLER, JAMES
Address: 815 PARK AVENUE
City-St-Zip: BALTIMORE, MD 21201

Title: D () Delete
Name: ASKEW, TIMOTHY
Address: 321 WOODLAWN ROAD
City-St-Zip: BALTIMORE, MD 21210

Title: D () Delete
Name: FROST, NORMAN JR
Address: 100 LIGHT STREET
City-St-Zip: BALTIMORE, MD 21201

Title: D () Delete
Name: FULLER, RICHARD
Address: 253 SUNRISE CAY # 102
City-St-Zip: NAPLES, FL 34114

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: ASKEW, TIMOTHY
Address: 1101 E. 33RD STREET, SUITE B311
City-St-Zip: BALTIMORE, MD 21218

Title: D (X) Change () Addition
Name: FROST, NORMAN JR
Address: 4305 RUGBY ROAD
City-St-Zip: BALTIMORE, MD 21210

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES LEIMKUHLER

T

05/02/2006

Electronic Signature of Signing Officer or Director

Date