

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 844085

FILED
Apr 30, 2009
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)

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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: 3225 ELLERSLIE AVE, 3RD FLOOR, #A305
City-St-Zip: BALTIMORE, MD 21218

Title: C () Delete
Name: FROST, NORMAN JR
Address: 4305 RUGBY ROAD
City-St-Zip: BALTIMORE, MD 21210

Title: D () Delete
Name: CAMPBELL, RICHARD
Address: 440 HUT HILL ROAD
City-St-Zip: BRIDGEWATER, CT 06752

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: BOURNE, KENNETH JR
Address: 1800 INDIAN HEAD ROAD
City-St-Zip: TOWSON, MD 21204

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

I hereby certify that the information supplied with this filing does not qualify 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

TS

04/30/2009

Electronic Signature of Signing Officer or Director

Date