2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2012
Secretary of State

DOCUMENT# P04000094929

Entity Name: CORD:USE CORD BLOOD BANK, INC.

Current Principal Place of Business:

1991 SUMMIT PARK DRIVE
SUITE 2000
ORLANDO, FL 32810 US

New Principal Place of Business:

Current Mailing Address:

1991 SUMMIT PARK DRIVE
SUITE 2000
ORLANDO, FL 32810 US

New Mailing Address:

FEI Number: 11-3723078 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ERNST, MICHAEL T
1627 ELIZABETH'S WALK
WINTER PARK, FL 32789 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: PRES
Name: GUINDI, EDWARD S M.D.
Address: 2190 TERRACE BLVD.
City-St-Zip: LONGWOOD, FL 32779 US

Title: CFO
Name: ERNST, MICHAEL T
Address: 1627 ELIZABETH'S WALK
City-St-Zip: WINTER PARK, FL 32789

Title: DIRE
Name: BECHTEL, CAROLYN
Address: 80 CENTRAL PARK WEST, #10C
City-St-Zip: NEW YORK, NY 10023 US

Title: DIRE
Name: WARREN, JOSEPH III
Address: 219 GREENWICH ROAD
City-St-Zip: CHARLOTTE, NC 28211 US

Title: DIRE
Name: HALEY, MICHAEL W
Address: 12121 WEST END
City-St-Zip: NORTH PALM BEACH, FL 33408 US

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: MICHAEL T. ERNST CFO 04/13/2012

Electronic Signature of Signing Officer or Director Date