

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000094929

**Entity Name:** CORD:USE CORD BLOOD BANK, INC.**Current Principal Place of Business:**1991 SUMMIT PARK DRIVE  
SUITE 2000  
ORLANDO, FL 32810**Current Mailing Address:**1991 SUMMIT PARK DRIVE  
SUITE 2000  
ORLANDO, FL 32810 US**FEI Number: 11-3723078****Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**ERNST, MICHAEL T  
1627 ELIZABETH'S WALK  
WINTER PARK, FL 32789 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	PRES
Name	GUINDI, EDWARD SM.D.
Address	2190 TERRACE BLVD.
City-State-Zip:	LONGWOOD FL 32779

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

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

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

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

*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****EXECUTIVE VICE  
PRESIDENT & CFO****04/29/2013**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date