

2015 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 844085

Entity Name: TISSUE BANKS INTERNATIONAL, INCORPORATED**Current Principal Place of Business:**815 PARK AVE.
BALTIMORE, MD 21201**Current Mailing Address:**815 PARK AVE.
BALTIMORE, MD 21201**FEI Number:** 52-1290067**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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	C
Name	MILLS, C. RANDAL
Address	7015 ALBERT EINSTEIN DRIVE
City-State-Zip:	COLUMBIA MD 21046

Title	CFO
Name	SEERY, GERALD B
Address	815 PARK AVE.
City-State-Zip:	BALTIMORE MD 21201

Title	D
Name	FURLONG, DOUGLAS
Address	815 PARK AVENUE
City-State-Zip:	BALTIMORE MD 21201

Title	D
Name	LYONS, WILLIAM
Address	815 PARK AVENUE
City-State-Zip:	BALTIMORE MD 21201

Title	CFO
Name	CORDELL, ED
Address	815 PARK AVE.
City-State-Zip:	BALTIMORE MD 21201

Title	COO
Name	WILLIAMS, MICHELLS L PHD
Address	815 PARK AVE.
City-State-Zip:	BALTIMORE MD 21201

Title	DIRECTOR
Name	CARMITCHEL, HARRY
Address	815 PARK AVE.
City-State-Zip:	BALTIMORE MD 21201

Title	DIRECTOR
Name	GRANDE, JOHN J.
Address	815 PARK AVE.
City-State-Zip:	BALTIMORE MD 21201

Continues on page 2

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GERALD B. SEERY

CEO

02/23/2015

Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title DIRECTOR
Name ORT, KAREN
Address 815 PARK AVE.
City-State-Zip: BALTIMORE MD 21201

Title DIRECTOR
Name STARK, WALTER J DR.
Address 815 PARK AVE.
City-State-Zip: BALTIMORE MD 21201

Title DIRECTOR
Name VOSSEKUIL, BRYAN
Address 815 PARK AVE.
City-State-Zip: BALTIMORE MD 21201

Title DIRECTOR
Name SMITH, TESSIE
Address 815 PARK AVE.
City-State-Zip: BALTIMORE MD 21201

Title DIRECTOR
Name VAGSNESS, THOMAS DR.
Address 815 PARK AVE.
City-State-Zip: BALTIMORE MD 21201