FORM 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB	APPROVAL
	0005

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Form 3 Holdings Reported.

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL **OWNERSHIP**

Form 4	Transactions F	Reported.	Filed	pursuant to S or Section 3		٠,				-							
Name and Address of Reporting Person* FRONK DAVID			2. Issuer Name and Ticker or Trading Symbol CRYOLIFE INC [CRY]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
(Last)	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2004							y/Year)	Director X Officer (give title below) VP - Clinical 1				Othe	r (specify			
1655 ROBERTS BLVD., NW (Street) KENNESAW GA 30144				4. If Amendment, Date of Original Filed (Month/Day/Year)							· ·	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting					
(City)	(Sta	ate) (2	Zip)	Person													
		Tabl	e I - Non-Deriv	ative Secu	ıritie	s Acc	uire	d, Dis	posed	of, or	Benefici	ally	y Owne	∍d			
Da		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Da		Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5				5. Amo Securit Benefic		ies	6. Own	ership I	7. Nature of Indirect Beneficial	
		(monan/bay/rear)	(Month/Day/Y	ear)			Amount		(A) or (D)	Price		Owned Issuer's	ed at end of Dir er's Fiscal Ind (Instr. 3 (Ins		ct (D) or 0	Ownership Instr. 4)	
Common Stock													12,505(1)			D	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	of Deriv Secu Acqu (A) o Disp	r osed) . 3, 4	Expira (Mont	ation Date th/Day/Year)		Amo Secu Unde Deriv Secu 3 and	Amount or Number	of De Se (In	f erivative ecurity nstr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	s Illy	10. Ownership Form: Direct (D) or Indirec (I) (Instr. 4)	Beneficial Ownership ect (Instr. 4)
					(A)	(D)	Date Exerc	isable	Expiration Date	n Title	of Shares						

Explanation of Responses:

1. Includes 1,749 shares acquired under the CryoLife, Inc. discounted employee stock purchase plan during 2004.

Remarks:

/s/ David Fronk

02/07/2005

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.