FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
hours per response:	0.5							

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*  HEACOX ALBERT E						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)	,	irst) (	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 03/10/2006										A bel	er (give title w) r. VP Research an		below)	
1655 RO	BERTS B	4. If Amendment, Date of Original Filed (Month/Day/Year)										Individual or Joint/Group Filing (Check Applicable Line)							
(Street) KENNES (City)			30144 (Zip)												X For	rm filed by One Reporting Person rm filed by More than One Reporting rson			
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day					ion 2A. Deemed Execution Date,			3. 4. Securities Acqu Transaction Disposed Of (D) (In Code (Instr. and 5)				quire	(A) or 5. Am Secur		mount of irities eficially ed	For (D) Indi	irect (I)	7. Nature of Indirect Beneficial Ownership	
					Code	v	Amount	A) 1)	A) or ()	Price	Rep Trar	owing orted saction(s) r. 3 and 4)	(ins	str. 4)	(Instr. 4)				
Common	03/10/2	2006				F		1,636	5	D	\$4.2	25	7,614		D				
Common Stock																5,346		<b>I</b> <sup>(1)</sup>	By Trust
Common Stock												_				45,000		I <sup>(2)</sup>	By Trust
Common Stock																200		<b>I</b> <sup>(3)</sup>	By Trusts
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		if any	emed tion Date, n/Day/Year)	4. Transaction Code (Instr. 8)		5. Nu of Deriv Secui Acqu (A) oi Dispo of (D) (Instr and 5	rities ired r osed . 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Exercisable Expiration Date			7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4)		ount nber	8. Price of Derivativ Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

## **Explanation of Responses:**

- $1.\ The\ 5,346\ shares\ are\ owned\ by\ Albert\ E.\ Heacox,\ Trustee,\ Albert\ E.\ Heacox\ Living\ Trust\ under\ an\ agreement\ dated\ 10-29-99.$
- 2. The 45,000 shares are owned by Dr. Heacox's spouse as Virginia Heacox, FBO Virginia Heacox, Trustee, or successor Trustees of the Virginia Heacox Living Trust under an agreement dated 10-29-99.
- 3. Includes 100 shares owned by Albert E. Heacox C/F Rachel K. Heacox, UTMA/GA and 100 shares owned by Albert E. Heacox C/F Daniel A. Heacox UTMA/GA. The reporting person disclaims beneficial ownership of all securities held by his daughter and son, and this report should not be deemed an admission that the reporting person is the beneficial owner of such securities for purposes of Section 16 or for any other purpose.

## Remarks:

/s/ Albert E. Heacox

03/13/2006

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.