

TRADEMARK ASSIGNMENT

Electronic Version v1.1
 Stylesheet Version v1.1

SUBMISSION TYPE:	CORRECTIVE ASSIGNMENT
NATURE OF CONVEYANCE:	Corrective Assignment to correct the State of Incorporation for Assignee, Derma Sciences, Inc. previously recorded on Reel 002604 Frame 0723. Assignor(s) hereby confirms the Merger.

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
GENETIC LABORATORIES WOUND CARE, INC.		12/28/1999	CORPORATION: MINNESOTA

RECEIVING PARTY DATA

Name:	DERMA SCIENCES, INC.
Street Address:	214 CARNEGIE CENTER, SUITE 100
City:	PRINCETON
State/Country:	NEW JERSEY
Postal Code:	08540
Entity Type:	CORPORATION: PENNSYLVANIA

PROPERTY NUMBERS Total: 1

Property Type	Number	Word Mark
Registration Number:	2069517	CATH-STRIP

CORRESPONDENCE DATA

Fax Number: (816)691-3495
Correspondence will be sent via US Mail when the fax attempt is unsuccessful.
 Phone: (816) 842-8600
 Email: TRADEMARK@STINSON.COM
 Correspondent Name: CONSTANCE M. JORDAN
 Address Line 1: 1201 WALNUT, SUITE 2900
 Address Line 2: STINSON TRADEMARK ADMINISTRATOR
 Address Line 4: KANSAS CITY, MISSISSIPPI 64106-2150

ATTORNEY DOCKET NUMBER:	506382-0007
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NAME OF SUBMITTER:	CONSTANCE M. JORDAN
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Signature:

/CMJ/

Date:

04/25/2007

Total Attachments: 2

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10-28-2002



102262618

September 25, 2002

RECORDATION FORM COVER SHEET

TRADEMARKS ONLY

9.30.02

TRADEMARKS ONLY

OUR FILE NO. 960305

BOX ASSIGNMENTS/FEE
Assistant Commissioner for Trademarks
2900 Crystal Drive
Arlington, Virginia 22202-3513

To the Honorable Commissioner of Patents and Trademarks. Please record the attached original document or copy thereof.

1. Name of Party(ies) conveying an interest:
Genetic Laboratories Wound Care, Inc.

Individual(s) Association
 General Partnership Limited Partnership
 Corporation-State of Minnesota
 Other _____

2. Name and Address of Party(ies) receiving an interest:
Name: Derma Sciences, Inc.
Street Address: 214 Carnegie Center, #100
City: Princeton
State: NJ Zip: 08540

Individual(s) citizenship _____
 Association _____
 General Partnership _____
 Limited Partnership _____
 Corporation-State of New Jersey
 Other _____

If assignee is not domiciled in the United States, a domestic representative designated is attached: Yes No
(Designation must be a separate document from Assignment)

3. Nature of Conveyance:
 Assignment Merger
 Security Agreement Change of Name
 Other _____

Execution Date: December 28, 1999

10/07/2002 KSTIBRNS 00000070 2059517

01 FC:372 100.00 SP
02 FC:373 200.00 SP

TRADEMARK
REEL: 003529 FRAME: 0135

BOX ASSIGNMENTS/FEE
Assistant Commissioner for Trademarks
September 25, 2002
Page Two

4. Application number(s) or registration number(s):
 - A. Trademark Application No.(s)
 - B. Trademark Registration No.(s)
2,069,517
5. Name and address of party of whom correspondence concerning document should be mailed:
Name: Thomas J. Nikolai, Esq.
NIKOLAI & MERSEREAU, P.A.
Street Address: 900 Second Avenue South, #820
City: Minneapolis State: MN Zip: 55402-3325
6. Number of applications and registrations involved: One
7. Total Fee (37 CFR 3.41): \$40.00
X A check is enclosed.
8. The Commissioner is authorized to charge any fees or refund any overpayment under 37 CFR 2.6 which may be required by this paper to Deposit Account No. 08-1265.

DO NOT USE THIS SPACE

9. Statement and signature.
To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.

Thomas J. Nikolai
Name of Person Signing


Signature

Date: 09/25/02

Total number of pages including
cover sheet, attachments and document: 3