

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000005071

FILED
Sep 08, 2004
Secretary of State**Entity Name:** SMALL WORLD FOUNDATION, INC.**Current Principal Place of Business:**5353 N. FEDERAL HIGHWAY, SUITE 301
FORT LAUDERDALE, FL 33318**New Principal Place of Business:****Current Mailing Address:**3400 CHASE TOWER
600 TRAVIS STREET
HOUSTON, TX 77002**New Mailing Address:****FEI Number:** 75-2631461**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ARNOLD, LAURENCE I M.D.
5353 N. FEDERAL HIGHWAY, SUITE 301
FORT LAUDERDALE, FL 33318**Name and Address of New Registered Agent:**

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

OFFICERS AND DIRECTORS:

Title: PCD () Delete
Name: ARNOLD, LAURENCE I M.D.
Address: 5353 N. FEDERAL HIGHWAY, SUITE 301
City-St-Zip: FORT LAUDERDALE, FL 33318

Title: VD () Delete
Name: HOPKINS, KEVIN S M.D.
Address: 7777 FOREST LANE, SUITE C-717
City-St-Zip: DALLAS, TX 75230

Title: SD () Delete
Name: TOLLE, MICHAEL A MD
Address: 399 WEST CAMPBELL ROAD SUITE 2
City-St-Zip: RICHARDSON, TX 75080

Title: TD () Delete
Name: NORWOOD, REBECCA
Address: 3696 NORTH FEDERAL HWY
City-St-Zip: FORT LAUDERDALE, FL 33308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LAURENCE I. ARNOLD

PCD

09/08/2004

Electronic Signature of Signing Officer or Director

Date