

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 APR -4 PM 7:11

DOCUMENT # **H21274 (6)**

1. Corporation Name  
**SWWH, INC.**

Principal Place of Business      Mailing Address  
**2001 BRYAN STREET  
2300  
DALLAS TX 75201-0005  
US**                                      **2001 BRYAN STREET  
SUITE 2300  
DALLAS TX 75201-0005  
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified      3a. Date of Last Report  
**09/13/1984**                                      **05/01/1994**

4. FEI Number      Applied For  
**75-1983051**                                      Not Applicable

5. Certificate of Status Desired       **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution       **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes       Yes       No

2. Principal Place of Business      2a. Mailing Address

21      26

Suite, Apt. #, etc.      Suite, Apt. #, etc.

22      27

City & State      City & State

23      28

Zip      Country      Zip      Country

24      25      29      30

9. Name and Address of Current Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM INC.  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City      85 Zip Code

**FL**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE      PD  
NAME      DANZIGER, ERIC A.  
STREET ADDRESS      2001 BRYAN ST., #2300  
CITY-ST-ZIP      DALLAS TX

TITLE      V  
NAME      KLUMPH, JOHN  
STREET ADDRESS      2001 BRYAN ST., #2300  
CITY-ST-ZIP      DALLAS TX

TITLE      T  
NAME      KHUMPH, JOHN R.  
STREET ADDRESS      2001 BRYAN ST., #2300  
CITY-ST-ZIP      DALLAS TX

TITLE      S  
NAME      TURNER, ELISE M  
STREET ADDRESS      2001 BRYAN ST., #2300  
CITY-ST-ZIP      DALLAS TX

TITLE      AS  
NAME      BAXTER, IAN  
STREET ADDRESS      2001 ROSS AVE #3200  
CITY-ST-ZIP      DALLAS TX

TITLE      \_\_\_\_\_  
NAME      \_\_\_\_\_  
STREET ADDRESS      \_\_\_\_\_  
CITY-ST-ZIP      \_\_\_\_\_

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE       Change       Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE       Change       Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE       Change       Addition

3.2 NAME      **KLUMPH, JOHN P.**

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE       Change       Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE       Change       Addition

5.2 NAME

5.3 STREET ADDRESS      **2001 BRYAN ST, #2300**

5.4 CITY-ST-ZIP      **DALLAS, TEXAS 75201**

6.1 TITLE       Change       Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the resolver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 of this report or on attachment with an address.

SIGNATURE: *Elise Turner*      **Elise Turner**      **3/30/95**      **214985873**  
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR