1173951

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549



FORM D

APR 1 8 2003

OMB APPROVAL
OMB Number: 3235-0076
Expires: May 31, 2005
Estimated average burden hours per response.....16

NOTICE OF SALE OF SECURITIES (
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY							
Prefix		Serial					
DAT	E RECEI	VED					

Name of Offering (check if this is Series B Convertible Preferred	an amendment and name has changed, and i Stock	ndicate change.)
Filing Under (Check box(es) that apply):	[] Rule 504 [] Rule 505 [X] Rule 506	
Type of Filing: [X] New Filing	[] Amendment	PROCESSE APR 2 2 2003
	A. BASIC IDENTIFICATION DATA	THOMSON EMANCIAL
Enter the information requeste	d about the issuer	
Name of Issuer (check if this is an CMI Holding Company, In	n amendment and name has changed, and inc nc.	dicate change.)
Address of Executive Offices Number (Including Area Code) 1876 Firman Drive, Richa	(Number and Street, City, State, Zip Code) ardson, Texas 75081	Telephone (972) 783-0644
Address of Principal Business Op Number (Including Area Code) (if different from Executive Office	perations (Number and Street, City, State, Zips)	o Code) Telephone
Brief Description of Business Development, manufactu	re and sale of medical devices used in cardio	vascular surgery
Type of Business Organization		
[X] corporation	[] limited partnership, already formed	[] other (please specify):
[] business trust	[] limited partnership, to be formed	
Management (Man 700) based over with rise strictly and discrete properties and management (Management of Management of Managemen	Month Year	oraccentermina ar union which as in the handrid and the through an an assessment and any other with sooks
Actual or Estimated Date of Incor	poration or Organization: [0][8][9][5]	[X] Actual [] Estimated
Jurisdiction of Incorporation or O	rganization: (Enter two-letter U.S. Postal Servi	ce abbreviation for State:

CN for Canada; FN for other foreign jurisdiction) [T][X]

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seg. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

***************************************		······································			riana di socia sicala :	******	****	
Check Apply:	Box(es) that [] Promoter [X] Beneficial Owner	[X]	Executive Officer	[X]	Director	[]	General and/or Managing Partner
Full Na	me (Last name first, if individua Davis, Albert M.	al)		Makaka intika hijint (cinambah hindi kua senjari Mancain) singa anti saggara yak	***************************************			and a straight to a straight a straight the great and a straight to a s
Busine	ss or Residence Address (Num 1876 Firman Drive, Richardsc		City,	State, Zip Code)	***************************************		
Check Apply:	Box(es) that [] Promoter [] Beneficial Owner	[]	Executive Officer	[X]	Director	[]	General and/or Managing Partner
Full Na	me (Last name first, if individua Meyer, Jack E.	ai)	ercollinave anacroca	он администрация в образо от тране образовательной дена образовательном образовательном дена образовательном дена образовательном дена	ARONOS CONSTRUENTA			The second secon
Busine	ss or Residence Address (Num 4805 Rustic Way, Shorewood			State, Zip Code)			
Check Apply:	Box(es) that [] Promoter [Beneficial Owner	[]	Executive Officer	[X]	Director	[]	General and/or Managing Partner
Full Na	me (Last name first, if individua Kimmey, Richard Jay	al)					ha (12 km / 14 km ru	iki hata kanalan sa mara yani manga kananah sa saka kanala kananah sa kananah sa kananah sa kananah sa kananah
Busine	ss or Residence Address (Num 268 North Bay Drive, Bullard,		City,	State, Zip Code)			
Check Apply:	Box(es) that [] Promoter [Beneficial Owner	[]	Executive Officer	[X]	Director	[]	General and/or Managing Partner
Full Na	me (Last name first, if individua Cox, James L., M.D.	al)	**************************************	pangkan pengangan kanggan kanggan kanggan kanggan kanggan kanggan pengangan kanggan kanggan kanggan kanggan ka	and the second	Marie a ser en		THE CONTRACT OF MICROSCOPE STOCKS AND REAL PROPERTY AND REAL PROPE
	ss or Residence Address (Num 3523 Rosewood Lane, Naples		City,	State, Zip Code)	одинация в населения в на		Maria dan Sar Parances da Maria Sara Sara Sara Sara Sara Sara Sara

Check Apply:	Box(es) that	[] Promoter	[] Beneficial Owner	[X]	Executive Officer	[] Director	[]	General and/or Managing Partner
Full Na	ame (Last nam Hernon, Dav	ne first, if individe vid	ual)		Angel Sangue, La Comment Comme		***************************************	**************	от не при
Busine			mber and Street, son, Texas 75081	City,	State, Zip Cod	de)			
Check Apply:	Box(es) that	t[] Promoter[x] Beneficial Owner	[]	Executive Officer	[]] Director	[]	General and/or Managing Partner
Full Na		ne first, if individu Group of Texas			<u></u>	***************************************			
Busine			mber and Street, 50, Dallas, Texas			de)			
Check Apply:	Box(es) that	t [] Promoter [x] Beneficial Owner	[]	Executive Officer	[]] Director	[]	General and/or Managing Partner
Full Na	•	ne first, if individu hwest Corporati	•	**************************************	agades aga ga aga aga aga aga aga aga aga aga				Magazini, principi, and a second
Busine			mber and Street, 700, Dallas, Texas			de)			
Check Apply:	Box(es) that	t [] Promoter [x] Beneficial Owner	[]	Executive Officer	[]	Director	[]	General and/or Managing Partner
Full Na		ne first, if individu hwest Venture C							
Busine			mber and Street, 700, Dallas, Texas			de)			
Check Apply:	Box(es) that	[] Promoter [x] Beneficial Owner	[]	Executive Officer		Director	[]	General and/or Managing Partner
Full Na	`	ne first, if individuentures I, L.P.	ual)	**************************************	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	***************************************	uda an arri Anti di Milina anday ana arrivana	······································	Procureging learn to the standard and Market Reposition of Conference of Standard Standard Standard Standard S
Busine			mber and Street, e 820, Addison, Te			de)	-		The second secon

Check Apply:	Box(es) that [] Promoter [] Beneficial Owner	[]	Executive Officer	[x]	Director	[]	General and/or Managing Partner
Full Na	me (Last name first, if individu O'Donnell, James A.	al)					******	
Busine	ss or Residence Address (Nur 5949 Sherry Lane, Suite 145		•		e)			
Check Apply:	Box(es) that [] Promoter [] Beneficial Owner	[]	Executive Officer	[x]	Director	[]	General and/or Managing Partner
Full Na	me (Last name first, if individu Ashbaugh, William M.	al)	**************************************	ernige di salah kerengan kecamatan di salah di s	······································		All Hammer	AND
Busine	ss or Residence Address (Nun 12900 Preston Road, Suite 7				;)			and committee in the committee of the co
Check Apply:	Box(es) that [] Promoter [] Beneficial Owner	[]	Executive Officer	[x]	Director	[]	General and/or Managing Partner
Full Na	me (Last name first, if individu Duty, J. Bruce	al)			**************************************	100-100 (1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	***************************************	
Busines	ss or Residence Address (Nun 15301 Dallas Parkway, Suite				;)			

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

199 1-100-100-100-10-10-10-1	• * P• • * * * * * * * * * * * * * * * *					***************	***************	*****					***************************************
Militarypelocument result re-		P747774744 *****************************	TOOLERS SECTION OF THE WAS A SECTION OF THE SECTION	B. IN	IFORMA	TION A	воит о	FFERING	3	**************************************	#************************************	······································	w-taccountries.
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									s Y	es]	No [X		
Answer also in Appendix, Column 2, if filing under ULOE.													
2. Wh	at is the	minimu	m invest	ment th	at will be	accepte	ed from a	any indivi	dual?		\$	N/	/A
3. Do	es the of	fering p	ermit joi	nt owne	rship of a	a single ι	unit?	•••••			Y	es 1	No [X
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.													
Full N	ame (La	st name	first, if i	ndividua	al) N/A							***************************************	
Busin	ess or R	esidenc	e Addre	ss (Num	ber and	Street, 0	City, Stat	e, Zip Co	ode)				
Name	of Asso	ciated E	Broker or	Dealer	ancesico de co rte de la copulaçõe de la co colo de la copulaçõe de la copulaçõe de la copulaçõe de la copulaçõe	***************************************	annonen on the state of the sta					*************	
States	in Whic	h Perso	n Listed	Has Sc	olicited or	Intends	to Solici	it Purcha	sers				
(Chec	k "All	States"	or chec	k indiv	idual St	ates)				[] All S	State	es
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	ſ	ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	-	MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full N	ame (La	st name	e first, if i	ndividua	al)								
Busin	ess or R	esidenc	e Addre	ss (Num	ber and	Street, 0	City, Stat	e, Zip Co	de)				
Name	of Asso	ciated B	Broker or	Dealer									
								t Purcha	sers	г	7 A 11 G	74 - 4 .	
`						,	• • • • • • • • • • • • • • • • • • • •			[] All S		
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	_	ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	_	MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	_	PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	-	HDMC46641C61C6CCGHWP7CCC64	***************************************
1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box [X] and indicate in the columns below the amounts of the securities offered for exchange and alread exchanged.	e e		
Tune of Coourity	Aggreg Offeri	ng	Amount Already
Type of Security Debt	Price \$		Sold \$
Equity	\$ 870,49		φ \$ 870,493
[] Common [X] Preferred	Ψ <u>01 0, π</u>	<u> </u>	Ψ <u>ΟΙΟ, 1ΟΟ</u>
Convertible Securities (including warrants)	\$ -0-		\$ -0-
Partnership Interests	\$ -0-		\$ <u>-0-</u> \$-0-
Other (Specify).	\$ -0-		\$ - 0-
Total	\$ 870,49		\$ <u>870,493</u>
Answer also in Appendix, Column 3, if filing under ULOE.	Ψ <u>010,10</u>	<u>~</u>	Ψ <u>σ, σ, του</u>
purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Accredited Investors Non-accredited Investors Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.	Number Investors 7 -00-	Dolla of Pu	70,493
Type of offering	Type of Security	Dolla Sold	ar Amount
	Security	Julu	
Rule 505	N/A	\$	<u> </u>
Regulation A	<u>N/A</u>	\$	
Rule 504	N/A	\$	
Total	<u>N/A</u>	\$	

4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

Transfer Agent's Fees	[]\$ <u>-0-</u>
Printing and Engraving Costs	[]\$
Legal Fees	[X] \$ <u>5,000</u>
Accounting Fees	[]\$0
Engineering Fees	[]\$0-
Sales Commissions (specify finders' fees separately)	[]\$0
Other Expenses (identify)	[]\$0
Total	[X] \$ <u>5,000</u>

b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."

\$ 865,493

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

	Payments to Officers, Directors, & Affiliates	Payments To Others
Salaries and fees	[]\$0	[]\$0
Purchase of real estate	[]\$0	[]\$0
Purchase, rental or leasing and installation of machinery and equipment.	[]\$0	[]\$0
Construction or leasing of plant buildings and facilities	[]\$0	[]\$0
Acquisition of other businesses (including the value of securities involve in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		[]\$0
Panayment of indehtedness	[]\$ -0-	[V]\$ 965 403
Repayment of indebtedness	* J *	[X]\$ <u>865,493</u>
Working capital	[]\$0-	[]\$
Other (specify):	[]\$ <u> -0- </u>	[]\$0
Column Totals	[]\$0	[]\$ <u>-</u> 0
Total Payments Listed (column totals added)	[]\$0-	[X]\$ <u>865,493</u>

D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)	Signature Date	
CMI Holding Company, Inc.	DM Herry April 15, 2003	3
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
David Hernon	Secretary	

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)