## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

VOLARE	MENT # P13690 , LTD. CORPORATION							
Principal Place of Business Mailing Address  270 RUTHERFORD LANE P. O. 80X 89  COLUMBIA TN 38401 COLUMBIA TN 38402-0089 US US								
					3. Date Incorporated or Qualified 03/19/1987	3a. Date of 03/13/1		port
2. Principal Place of Business 2a. Mailing Address			<del></del>		4. FEI Number	1 99/19/1		olied For
Suito Ani	# ote	Suite, Apt. #, etc.			¢9.75 Add		Applicable	
Suite, Apt. #. etc.		27			5. Certificate of Status Desired	1 1 7 7	Fee Red	
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be Added to Fees		
<b>23</b>	Country	<b>28</b>	Cou	ntry	Trust Fund Contribution  8. This corporation has liability for			
24	25	29	30		Florida Statutes	Yes No	)	199,002,
	9. Name and Address of Currer	nt Registered Agent		81 Name	10. Name and Address of New Re	gistered Agen	<u>t</u>	
RUMMEL, MARY 2323 CORBETT ROAD					O D N N N N N N N N N N N N N N N N N N			
	ANDO FL 32826				Address (P.O. Box Number is Not Acceptable)			
				83				
				84 City		FL B5	Zip C	ode
11. Pursoant	to the provisions of Sections 607,050	02 and 607.1508, Florida Statut	es, the at	ove-named corp	poration submits this statement for the I	ourpose of char	l nging its	registered
office or re agent. Lai	egistered agerit, or both, in the State in familiar with, and accept the oblig	e of Florida. Such change was a ations of, Section 607.0505, Fl	authorizeo orida Stati	t by the corpora utes.	poration submits this statement for the plants board of directors. I hereby acce	pt the appointm	ient as r	egistered
SIGNATURE						DATE		
12.	Signature, typest or printed name of registered ag OFFICERS AN	err and fille if applicable (NOF	E: Hegislered	Agent signature requi	ADDITIONS/CHANGES TO OFFICE		ECTOR:	S IN 12
TITLE	\$	DELETE	1,1 111	LE			Change	☐ Addition
NAME			1.2 NA	ME				
STREET ADDRESS	270 RUTHERFORD LANE		1.3 \$T	REET ADORESS				
City - ST - ZIP	COLUMBIA TN	☐ DELETE		IY-ST-ZIP		11,	Change	Addition
THLE NAME	PD Prettenhofer, Joseph		2 1 TIT 22 NA	· ·		Ļ., ·	viraniño.	L_J ADGIIION
STREET ADDRESS (	270 RUTHERFORD LANE			REET ADDRESS				
Cily-S1-2iP	COLUMBIA TN		1	TY-ST-ZIP				
TOLE	CD	DELETE	3 1 Til				Change	Addition
NAME	SWAROVSKI, M.		3.2 NA	ME				
STREET ADDRESS	240 RUTHERFORD LANE		3.3 ST	REET ADDRESS				
CITY-SI-ZIP	COLUMBIA TN	DELETE		TY-ST-ZIP	***************************************		Change	Addition
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NAME STREET ADDRESS	MITCHELL, STEVE 270 RUTHERFORD LANE			REET ADDRESS				
CITY-ST-ZiF	COLUMBIA TN		•	TY-ST-ZIP				
1011	A A PAINIAK I III	DELETE	5.1 TO				Change	Addition
NAME			5.2 NA	ME				
STREET ADORESS			5.3 \$1	REET ADDRESS				
COTY - ST- ZIP				TY-ST-ZIP				7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
TITLE		☐ DELETE	6.1 Til	• • •		L) (	Change	L Addition
NAME			62 NA					
STREET ADDRESS				REET ADDRESS				
14. Ldo heres	by cortify that the information supplic	ed with this filing does not qual		ry-st-zip exemption state	d in Section 119.07(3)(i), Florida Statuto	s. I further cert	ify that	the
informatic	indicator on this annual report or	supplemental annual report is:	triue and s	occurate and tha	at my signature shall have the same leg ort as required by Chapter 607, Florida	al effect as if m	ade und	der oath: tha

**SIGNATURE:** 

3/1/97

(615) 388-5900

**FILED** 

Mar 10 1997 8:00am

Secretary of State

Daylime Phone #