

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000053730

1. Entity Name

TOP DRAWER CONSTRUCTION, INC.

FILED

Apr 24, 2001 8:00 am  
Secretary of State

04-24-2001 90247 012 \*\*\*150.00

Principal Place of Business

RT 7 BOX 923-C  
OLD SETTLEMENT RD  
TALLAHASSEE FL 32308

Mailing Address

RT 7 BOX 923-C  
OLD SETTLEMENT RD  
TALLAHASSEE FL 32308

2. Principal Place of Business

13374 Rabbit Run Tr.  
Suite, Apt. #, etc.

3. Mailing Address

13374 Rabbit Run Tr.  
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Tallahassee FL  
Zip 32308 Country Leon

City & State

Tallahassee FL  
Zip 32308 Country Leon

4. FEI Number

59-3335363

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

KOELLIKER, GEORGE  
RT 7 BOX 923-C  
OLD SETTLEMENT RD  
TALLAHASSEE FL 32308

7. Name and Address of New Registered Agent

Name

Keelliker, George

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

13374 Rabbit Run Trail

City

Tallahassee

FL

Zip Code

32308

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back)



**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution.

☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE D  
NAME KOELLIKER, GEORGE  
STREET ADDRESS RT 7 BOX 923-C OLD SETTLEMENT RD  
CITY-ST-ZIP TALLAHASSEE FL 32308

☐ Delete

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

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☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify 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 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

George Koelliker

4/18/01

Date

850-893-7250

Daytime Phone #

CR2E034 (10/00)