

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000101130

1. Entity Name

KILLEARN LIQUORS, INC.

Principal Place of Business

2910 KERRY FOREST PKWY
SA
TALLAHASSEE FL 32308

Mailing Address

6433 JET PILOT TRAIL
TALLAHASSEE FL 32308

2. Principal Place of Business

6433 JET PILOT TRAIL

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

TALLAHASSEE FL

City & State

Zip

Country US

Zip

Country

4. FEI Number

59-3480727

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KLOPFENSTEIN, BRUCE
6433 JET PILOT TRAIL
TALLAHASSEE FL 32308

Name

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

City

FL

Zip Code

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

Bruce A. Klopfenstein

BRUCE A. KLOPFENSTEIN PRESIDENT

DATE

6/5/02

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

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, 2002 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME KLOPFENSTEIN, BRUCE
STREET ADDRESS 6433 JET PILOT TRAIL
CITY-ST-ZIP TALLAHASSEE FL 32308

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME KLOPFENSTEIN, CAROL
STREET ADDRESS 6433 JET PILOT TRAIL
CITY-ST-ZIP TALLAHASSEE FL 32308

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Bruce A. Klopfenstein PRESIDENT

6/5/02

850-668-7627

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

FILED
Jun 30, 2002 8:00 am
Secretary of State

06-30-2002 90230 013 ***150.00

B0126338



DO NOT WRITE IN THIS SPACE

CR2E034 (9/01)



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

Attachment
Document #
P97000101130
B012638

June 7, 2002

KILLEARN LIQUORS, INC.
6433 JET PILOT TRAIL
TALLAHASSEE, FL 32308

Subject: KILLEARN LIQUORS, INC.

Reference Number: P97000101130

Please be advised, we have received your annual report/uniform business report; however, the report **has not been filed** and a copy is being returned for the following correction(s):

To be accepted by our bank, a check must be completed in its entirety. Both the numeric and written amounts must be completed.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/JC
ANNUAL REPORTS SECTION

Sony - I write so
many checks ... forgot
to write in the amount.
So Sony,

BK