

CHECKERS DRIVE IN RESTAURANTS INC /DE

Form 4/A

August 22, 2001

BUSINESS ADDRESS:

STREET 1: I4255 49TH STREET NORTH BLDG I

CITY: CLEARWATER

STATE: FL

ZIP: K3762

BUSINESS PHONE:0275192000

MAIL ADDRESS:

STREET 1: I4255 49TH STREET NORTH, BLDG I

CITY: CLEARWATER

STATE: FL

ZIP: K3762

STATEMENT FOR MONTH/YEAR: DECEMBER 2000

COMPANY DATA:

COMPANY CONFORMED NAME: DANIEL J. DORSCH

CENTRAL INDEX KEY: H001101862

STANDARD INDUSTRIAL CLASSIFICATION:

RELATIONSHIP: DIRECTOR/CEO

FILING VALUES:

FORM TYPE: LA

BUSINESS ADDRESS:

STREET 1: I4255 49<sup>TH</sup> STREET NORTH

STREET 2: BUILDING 1

CITY: CLEARWATER

STATE: FL

ZIP: K3762

MAIL ADDRESS:

STREET 1: N326 MACLAURIN DRIVE

STREET 2:

CITY: TAMPA

STATE: FL

ZIP: K3647

**Table I Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

| Title of Non-Derivative Security | Transaction Date | Transaction Code | Security Amount | Securities Acquired/ Disposed (A/D) | Securities Price | Amount Beneficially Owned at End of the Month | Ownership Direct or Indirect | Nature of Indirect Beneficial Ownership |
|----------------------------------|------------------|------------------|-----------------|-------------------------------------|------------------|---|------------------------------|---|
|                                  |                  |                  |                 |                                     |                  |   |                              |   |
|                                  |                  |                  |                 |                                     |                  |   |                              |   |

**Table II Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

| Transaction Date | Transaction Code | Securities Acquired/Disposed | Date Exercisable | Expiration Date | Title | Number of Shares | Price of Security | Number Beneficially Owned End of Month | Owned In |
|------------------|------------------|------------------------------|------------------|-----------------|-------|------------------|-------------------|--|----------|
|                  |                  |                              |                  |                 |       |                  |                   |  |          |
|                  |                  |                              |                  |                 |       |                  |                   |  |          |

Explanation of Responses:

All stock is part of an Employee Stock Option Plan.

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 Signature of Reporting Person                      Date