

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 16, 2001 8:00 am**  
**Secretary of State**

03-16-2001 90022 006 \*\*\*150.00

**DOCUMENT # P97000002287**

1. Entity Name

**ACCESS LEGAL INSURANCE, INC.**

Principal Place of Business

3000 NW 101 ST LANE  
CORAL SPRINGS FL 33065  
US

Mailing Address

3000 NW 101 ST LANE  
CORAL SPRINGS FL 33065  
US

2. Principal Place of Business

1749 NE 26th St

3. Mailing Address

1749 NE 26th St

Suite, Apt. #, etc.

F

Suite, Apt. #, etc.

F

City & State

Fort Lauderdale, Florida

City & State

Fort Lauderdale, FL

Zip

33305

Country

USA

Zip

33305

Country

USA

4. FEI Number

59-3455152

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

OATES, DANIEL  
1500 E ATLANTIC BLVD  
STE B  
POMPANO BEACH FL 33060

7. Name and Address of New Registered Agent

Name Phillip M. Wardell  
Street Address (P.O. Box Number is Not Acceptable)  
1749 NE 26th St Suite F  
City Fort Lauderdale FL Zip Code 33305

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

Phillip M Wardell - President

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

(NOTE: Registered Agent signature required when reinstating)

3-1-01

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 ☒ Delete  
NAME WARDELL, JAMES A  
STREET ADDRESS 400 N TAMPA ST STE 2950  
CITY-ST-ZIP TAMPA FL 33602

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE President ☐ Change ☒ Addition  
NAME Phillip M. Wardell  
STREET ADDRESS 1749 NE 26th St Suite F  
CITY-ST-ZIP Fort Lauderdale, FL 33305

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

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

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

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:

Phillip M Wardell

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-1-01

DATE

954-568-4666

DAYTIME PHONE #

0130312

CR2E034 (10/00)