

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000076647

1. Entity Name

ACCESSLIFE.COM, INC.

FILED

Jul 26, 2000 8:00 am  
Secretary of State

07-26-2000 90011 042 \*1,100.00

Principal Place of Business

8800 GRAND OAK CIRCLE  
SUITE 510  
TAMPA FL 33637-2003

Mailing Address

8800 GRAND OAK CIRCLE  
SUITE 510  
TAMPA FL 33637-2003

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

593598217

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

GIORDANO, JOHN N ESQ  
220 SOUTH FRANKLIN STREET  
TAMPA FL 33602

Name Richard M. Leisner, Esquire

Street Address (P.O. Box Number is Not Acceptable)  
2160 Barnett Plaza

101 E. Kennedy Blvd.

City Tampa

FL

Zip Code 33601-1102

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 \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**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 ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
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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

7/20/00 813-248-3788  
Date Daytime Phone #

CR2E034 (5/00)

Attachment  
B# P99000076647  
00074659



8800 Grand Oak Circle, Suite #510  
Tampa, Florida 33637-2003  
T (813) 248-3788  
F (813) 248-6687  
mail@accesslife.com

## **AccessLife.com Officers & Directors**

### **CEO/T/D**

Steven A. MacDonald  
723 Seagate  
Tampa, FL 33602

### **CEO/S/D**

Charles T. O'Neill  
13719 Chestersall Drive  
Tampa, FL 33624

### **P/D**

Thomas R. Sweet  
4906 Hallstead Way  
Tampa, FL 33647

### **D**

Peter D. Kiernan, III  
428 Round Hill Road  
Greenwich, CT 06831

### **D**

Leonard Kleinrock  
318 North Rockingham Avenue  
Los Angeles, CA 90049

### **D**

Christopher Reeve  
11 Great Hill Farms Road  
Bedford, New York 10506

### **Chief Financial Officer/VP**

Richard Powell  
16101 Sexton Court  
Tampa, FL 33647