**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**
**Jan 06, 2021**
**Secretary of State**
**2314514737CC**

DOCUMENT# N20000006746

**Entity Name:** 601 OAK STREET WAREHOUSE CONDOMINIUN ASSOCIATION PHASE III, INC.

**Current Principal Place of Business:**

5909 WISHING WELL DRIVE
PORT ORANGE, FL 32127

**Current Mailing Address:**

5909 WISHING WELL DRIVE
PORT ORANGE, FL 32127 US

**FEI Number: APPLIED FOR**

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CAIN, ROGER
5909 WISHING WELL DRIVE
PORT ORANGE, FL 32127 US

*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: ROGER CAIN 01/06/2021

Electronic Signature of Registered Agent — Date

**Officer/Director Detail :**

| | | | |
|---|---|---|---|
| Title | DP | Title | DST |
| Name | CAIN, ROGER | Name | CAIN, SHELIA |
| Address | 5909 WISHING WELL DRIVE | Address | 5909 WISHING WELL DRIVE |
| City-State-Zip: | PORT ORANGE FL 32127 | City-State-Zip: | PORT ORANGE FL 32127 |

| | |
|---|---|
| Title | D |
| Name | CAMPAGNARI, TONY |
| Address | 3003 S. ATLANTIC AVE.<br>UNIT 11C6 |
| City-State-Zip: | DAYTONA BEACH SHORES FL 32118 |

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

SIGNATURE: ROGER CAIN PRESIDENT 01/06/2021

Electronic Signature of Signing Officer/Director Detail — Date