

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N94000002002

**FILED  
Apr 27, 2015  
Secretary of State  
CC1913510119**

**Entity Name:** BEL AIRE II, OFFICE CONDOMINIUM ASSN., INC.

**Current Principal Place of Business:**

2020 W. EAU GALLIE BLVD.  
SUITE 106  
MELBOURNE, FL 32935

**Current Mailing Address:**

2020 W. EAU GALLIE BLVD.  
SUITE 106  
MELBOURNE, FL 32935 US

**FEI Number: 59-3248364**

**Certificate of Status Desired: No**

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

BRUTZ, MICHAEL JESQ.  
2020 W. EAU GALLIE BLVD.  
SUITE 106  
MELBOURNE, FL 32935 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title DP  
Name BRUTZ, MICHAEL JMICHAEL  
Address 2020 W. EAU GALLIE BLVD.  
SUITE 106  
City-State-Zip: MELBOURNE FL 32935

Title DS  
Name VEIBL, PAULA MMICHAEL  
Address 1751 SARNO RD., #2  
City-State-Zip: MELBOURNE FL 32904

Title D  
Name HOOK, STEVEN MMICHAEL  
Address 1751 SARNO RD., STE 6  
City-State-Zip: MELBOURNE FL 32935

*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: MICHAEL J. BRUTZ**

**PRES**

**04/27/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date