

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

Jan 08, 2007 08:00 AM  
Secretary of State

DOCUMENT # N02000000779

1. Entity Name  
MIAMI BIRDMEN, INC.



Principal Place of Business  
9350 SW 124 STREET  
MIAMI, FL 33176

Mailing Address  
9350 SW 124 STREET  
MIAMI, FL 33176



01042007 No Chg-NP

CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
01-0605589

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

SCHUMACHER, BERNARD  
9350 SW 124 STREET  
MIAMI, FL 33176

**DO NOT WRITE  
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

000000570329  
01/09/07-80049-003 61.25

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
P  
SCHUMACHER, BERNARD  
9350 SW 124 STREET  
MIAMI, FL 33176

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
S  
CONROY, THOMAS R  
P.O. BOX 294  
LOXAHATCHEE, FL 33470

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
T  
SCHLAFLY, FRED E.  
13250 SW 97TH TERRACE  
MIAMI, FL 33186

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: Bernard Schumacher BERNARD SCHUMACHER Jan 4, 2007 305-970-0546  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #