

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000081829

**FILED**  
**Mar 02, 2007**  
**Secretary of State**

**Entity Name:** THE NATIONAL MUSEUM OF CRIME AND PUNISHMENT LLC

**Current Principal Place of Business:**

406 RICHARD ROAD  
ROCKLEDGE, FL 32955

**New Principal Place of Business:**

**Current Mailing Address:**

406 RICHARD ROAD  
ROCKLEDGE, FL 32955

**New Mailing Address:**

**FEI Number:** 20-5290047

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WINDERWEEDLE, HAINES, WARD & WOODMAN, PA  
390 N. ORANGE AVENUE, SUITE 1500  
ORLANDO, FL 32801 US

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

WHWW, INC.  
390 N. ORANGE AVENUE, SUITE 1500  
ORLANDO, FL 32801 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:** J.P. CAROLAN, III, PRESIDENT

03/02/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** ( ) Delete  
**Name:**  
**Address:**  
**City-St-Zip:**

**ADDITIONS/CHANGES:**

**Title:** PTR ( ) Change (X) Addition  
**Name:** MORGAN, JOHN  
**Address:** 20 N. ORANGE AVENUE, SUITE 1607  
**City-St-Zip:** ORLANDO, FL 32801

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:** JOHN MORGAN

PTR

03/02/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date