2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000029655

Entity Name: WEST KEY ASSOCIATES, LLC

FILED May 30, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2430 HWY 34, BLDG A MANASQUAN, NJ 18438 **Current Mailing Address: New Mailing Address:** 2430 HWY 34, BLDG A MANASQUAN, NJ 18438 FEI Number: 30-0244579 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DUFFY, DANIEL J 510 NOAH LANE KEY WEST, FL 33040 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 MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM () Delete Title: () Change () Addition IRISH, GEORGE P Name: Name: HC-1 BOX 525 Address: Address: City-St-Zip: LAKEVILLE, PA 18438 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: DUFFY, DANIEL J Name: Address: 2430 HIGHWAY 34, BLDG, A Address: City-St-Zip: MANASQUAN, NJ 08736 City-St-Zip: Title: MGR () Delete Title: () Change () Addition HYDE, R. REGINALD Name: Name: Address: P.O. BOX 232 Address: City-St-Zip: **SEA GIRT. NJ 08750** City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: COSTELLO, RONALD J Name: Address: 1534 TOBOGGAN RUN Address: City-St-Zip: MANASQUAN, NJ 08736 City-St-Zip: Title: MGR () Delete Title: () Change () Addition CANNOVA, JOSEPH Name: Name: 116 SHENANDOAH BLVD. Address: Address: TOMS RIVER, NJ 08753 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition NAVARRO, FRANK J Name: Name: Address: P.O. BOX 203 Address: ALLENWOOD, NJ 08720 City-St-Zip: City-St-Zip:

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: DANIEL J DUFFY MBR 05/30/2006