## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L04000029655

Entity Name: WEST KEY ASSOCIATES, LLC

ALLENWOOD, NJ 08720

City-St-Zip:

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
ATTN: JO	DPER AVENUE SEPH A. CANNO /ER, NJ 08753	VA,CPA, CFP		
Current Mailing Address:			New Mailing Address:	
ATTN: JO	DPER AVENUE SEPH A. CANNO /ER, NJ 08753	VA,CPA, CFP		
FEI Number: 30-0244579 FEI Number Applied For ( )			FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	d Address of Cu	rrent Registered Agent:	Name and Address	of New Registered Agent:
The above	HLANE ST, FL 33040 L	JS omits this statement for the բ	ourpose of changing its registere	ed office or registered agent, or both
SIGNATU				
	Electronic	Signature of Registered Age	ent	Date
MANAGING	MEMBERS/MANAGI	ERS:	ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGRM ( ) D IRISH, GEORGE F HC-1 BOX 525 LAKEVILLE, PA 1		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MGR ( ) D DUFFY, DANIEL J 2430 HIGHWAY 3 MANASQUAN, NJ	4, BLDG. A	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MGR () D HYDE, R. REGINA P.O. BOX 232 SEA GIRT, NJ 08	LD	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MGR ( ) D COSTELLO, RON. 501 BROADWAY POINT PLEASANT		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MGR ( ) D CANNOVA, JOSEF 1130 HOOPER AV TOMS RIVER, NJ	PH 'ENUE	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address:	MGR () D NAVARRO, FRANI P.O. BOX 203		Title: Name: Address:	( ) Change ( ) Addition

I hereby certify that the information supplied with this filing does not qualify 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.

City-St-Zip:

SIGNATURE: DANIEL J. DUFFY MGR 04/30/2009