

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000035089

FILED  
Mar 12, 2009  
Secretary of State

**Entity Name:** ALL KEYS GAS DISTRIBUTION, LLC

**Current Principal Place of Business:**

127 INDUSTRIAL BLVD.  
SUITE B  
BIG PINE KEY, FL 33043

**New Principal Place of Business:**

30046 OVERSEAS HIGHWAY  
BIG PINE KEY, FL 33043

**Current Mailing Address:**

127 INDUSTRIAL BLVD.  
SUITE B  
BIG PINE KEY, FL 33043

**New Mailing Address:**

30046 OVERSEAS HIGHWAY  
BIG PINE KEY, FL 33043

**FEI Number:** 26-2436725

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GLAZER, ERIC L ESQ.  
2300 CORPORATE BLVD. NW  
SUITE 232  
BOCA RATON, FL 33431 US

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

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:**

Title: MGRM ( ) Delete  
Name: PROPANE U.S.A. DISTR, UBUTION LLC  
Address: 1900 BANKS RD  
City-St-Zip: MARGATE, FL 33063

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

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM ( ) Change (X) Addition  
Name: OSKEY & OSKEY, LLC,  
Address: 30046 OVERSEAS HIGHWAY  
City-St-Zip: BIG PINE KEY, FL 33043

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.

SIGNATURE: STEVEN STERNECK

MGRM

03/12/2009

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