## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT # M03000003534

1. Entity Name

REALTY ASSOCIATES FUND VILLO

Principal Place of Business

C/O TA ASSOCIATES REALTY 28 STATE STREET, 10TH FLOOR BOSTON, MA 02109 Mailing Address

C/O TA ASSOCIATES REALTY 28 STATE STREET, 10TH FLOOR BOSTON, MA 02109

## FILED Mar 10, 2008 08:00 AN Secretary of State



01032008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 02-0583629 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY 1201 HAYS STREET		DO NOT WRITE
IALLAHA	SSEE, FL 32301-2525	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		
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75		
9.	MANAGING MEMBERS/MANAGERS	
TITLE	MGR	
NAME STREET ADDRESS	REAL ASSOCIATES ADVISORS, LLC 28 STATE STREET, 10TH FLOOR	
CITY-ST-ZIP	BOSTON, MA 02109	U00000851462
TITLE		03/25/08-80040-023 138.75
NAME		
STREET ADDRESS CITY+ST-ZIP		
TITLE		
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11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information		

indicated on this report is true and accurate and that my 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:

SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

2/2NOV (017-4710-070e

Daytime Phone #