

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # M99000000509 1. Entity Name REALTY ASSOCIATES ADVISORS LLC	
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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
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FILED
07 JUN -5 PM 2:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



05242007 No Chg-LLC

CR2E083 (11/05)

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4. FEI Number 04-3101169	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525

**DO NOT WRITE
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

**Filing Fee is \$50.00
Due by September 14, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGRM REALTY ASSOCIATES ADVISORS TRUST 28 STATE STREET, 10TH FLOOR BOSTON, MA 02109
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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing 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: Michael Ruane Michael Ruane 5/24/07 617 476 2700

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

Date

Daytime Phone #



CORPORATION SERVICE COMPANY

M99000000509

ACCOUNT NO. : 072100000032

REFERENCE : 931208 4304937

AUTHORIZATION :

COST LIMIT : \$ 50.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : June 4, 2007

ORDER TIME : 4:36 PM

ORDER NO. : 931208-050

CUSTOMER NO: 4304937

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ANNUAL REPORT FILING

NAME: REALTY ASSOCIATES ADVISORS LLC

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RECEIVED
07 JUN -5 PM 12:45
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea - Ext. 2914

EXAMINER'S INITIALS: _____