2002 UNIFORM BUSINESS REPORT (UBR)

May 06, 2002 8:00 am Secretary of State P93000047823 DOCUMENT # 1. Entity Name REGENCY CENTERS CORPORATION 05-06-2002 90067 021 ***150.00 Mailing Address Principal Place of Business 200 LAURA STREET 121 W. FORSYTH STREET JACKSONVILLE FL 32202 SUITE 200 JACKSONVILLE FL 32202 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number City & State City & State 59-3191743 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent F&L CORP Street Address (P.O. Box Number is Not Acceptable) 200 LAURA STREET JACKSONVILLE FL 32202 Zip Code City 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. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 · OFFICERS AND DIRECTORS 12. 11. Addition (☐ Delete TITLE Kathy D. Miller NAME STEIN, MARTIN E JR NAME 121 W. FORSYTH St. #200 121 W. FORSYTH ST. STE. 200 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Jacksonville FL 32202 Jacksonville PL 32202 CITY-ST-7/P ☐ Addition Change TITLE 🗶 Delete TITLE MILLER, ROBERT L NAME NAME STREET ADDRESS STREET ADDRESS 121 W. FORSYTH ST. STE. 200 CITY-ST-7IP JACKSONVILLE FL CITY-ST-ZIP ☐ Change ☐ Addition TITLE VST ☐ Delete TITLE LEAVITT, J C NAME STREET ADDRESS STREET ADDRESS 121 W. FORSYTH ST. STE. 200 CITY-ST-7IP CITY-ST-ZIP Jacksonville fl Change ☐ Addition VΡ Delete TITLE GILLANDER, ROBERT C NAME NAME STREET ADDRESS STREET ADDRESS 121 W. FORSYTH ST. STE. 200 CITY-ST-7IP JACKSONVILLE FL CITY-ST-7IP ☐ Delete TITLE Change Addition TITLE NAME THOMPSON, JAMES D NAME 121 W. FORSYTH ST. STE. 200 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL TITLE ☐ Addition ☐ Delete TITLE HOFHEIMER, NORMAN A JR NAME NAME 121 W. FORSYTH ST. STE. 200 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32202 CITY-ST-ZIP

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

KATHY D. MILLER

CR2E034 (9/01)

FILED