

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000002442

Entity Name: REGENCY REMEDIATION, LLC

Current Principal Place of Business:

ONE INDEPENDENT DRIVE
SUITE 114
JACKSONVILLE, FL 32202-5019

Current Mailing Address:

ONE INDEPENDENT DRIVE
SUITE 114
JACKSONVILLE, FL 32202-5019 US

FEI Number: 59-3573779

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

F & L CORP.
ONE INDEPENDENT DRIVE
SUITE 1300
JACKSONVILLE, FL 32202 US

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

Authorized Person(s) Detail :

Title MGR
Name REGENCY CENTERS LP
Address ONE INDEPENDENT DRIVE, SUITE
114
City-State-Zip: JACKSONVILLE FL 32202-5019

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KATHY D MILLER

SVP

04/08/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date