## **2013 FOREIGN LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# B9700000103

Entity Name: REGENCY CENTERS, L. P.

**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: 59-3429602 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

FILED Feb 27, 2013

**Secretary of State** 

CC3137559782

## **General Partner Detail:**

Document # P93000047823

Name REGENCY CENTERS CORPORATION
Address ONE INDEPENDENT DRIVE, SUITE

114

SIGNATURE: KATHY D. MILLER

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 general partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

Electronic Signature of Signing General Partner Detail

SR. VP - TAX

02/27/2013

Date