2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2001 08:00 AM
Secretary of State

DOCUMENT # A94000000321

1. Entity Name
REGENCY PROPERTIES, LTD.

Principal Place of Business	Mailing Address
3040 WEDGEWOOD BLVD. DELRAY BEACH FL 33445	3300 S. CONGRESS AVENUE SUITE 1A BOYNTON BEACH FL 33426

2. Principal Place of Business	3. Mailing Address
	2040 WEDGEWOOD BLVD.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State DELRAY BEACH FL
Zip / Country	Zip 33445 / Country US

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0494402 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HORA CHARLES M 3040 WEDGEWOOD BLVD. DELRAY BEACH FL 33445 US	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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 CHARLES HORA 04/30/2001
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. Capital Contributions as Shown on record. 16,000.00	10. Amount of Capital Contributions in FLORIDA to date. 16,000.00	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	 ARCO PROPERTIES, INC. 3040 WEDGEWOOD BOULEVARD DELRAY BEACH FL 33445	STREET ADDRESS CITY-ST-ZIP	
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CR2E003 (11/00)

14. 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 is true and accurate and that my 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

SIGNATURE: CHARLES HORA PRES 04/30/2001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #