

2002 UNIFORM BUSINESS REPORT (UBR)

APPROVE
AND
FILED

0006989
AT

DOCUMENT # **A96000000197**

1. Entity Name
REGENCY OCEAN EAST PARTNERSHIP, LTD.

02 APR 29 PM 3:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
**121 WEST FORSYTH STREET, SUITE 200
JACKSONVILLE FL 32202**

Mailing Address
**200 LAURA STREET
JACKSONVILLE FL 32202**



2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

DUE BY MAY 1, 2002

City & State

4. FEI Number **59-3376116** Applied For Not Applicable

Zip Country Zip Country

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

**F&L CORP.
200 LAURA ST.
JACKSONVILLE FL 32202**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. **\$2,643,922.00**

10. Amount of Capital Contributions in FLORIDA to date. **2,643,922.00**

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	B97000000103 REGENCY CENTERS, L.P. 121 WEST FORSYTH STREET, SUITE 200 JACKSONVILLE FL 32202	STREET ADDRESS	
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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

By **Regency Centers, L.P. by Regency Centers Corporation**

SIGNATURE: *Kathy D. Miller* **KATHY D. MILLER**
VICE PRESIDENT

Date: **4/24/02** Daytime Phone #: **(904) 598-7000**

CR2E003 (9/01)