

FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

98 DEC 22 PM 3: 58

1. Name of Limited Partnership

1a. DOCUMENT #
B97000000664

REGENCY OFFICE PARTNERSHIP, L.P.



Mailing Address 121 W. FORSYTH ST., SUITE 200 JACKSONVILLE FL 32202		Principal Office Address 121 W. FORSYTH ST., SUITE 200 JACKSONVILLE FL 32202		3. Date Formed or Registered 12/10/1997	5a. Capital Contributions as Shown on record. \$9,043,000.00
2. Mailing Address		2a. Principal Office Address		3a. Date of Last Report 12/31/1997	5b. Amount of Capital Contributions in FLORIDA to date:
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. State or Country of Formation DE	
City & State		City & State		6. FEI Number 59-3402467	
Zip		Zip		7. Certificate of Status Desired DE	
				8. Make check payable to: Dept. of State (See reverse side for fee information)	

9. Name and Address of Current Registered Agent F & L CORP. 200 LAURA STREET JACKSONVILLE FL 32202	10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code
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10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment) _____ DATE _____

**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

11. Name(s) of General Partner(s) RAC FL ONE, INC. Regency Centers, L.P.	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 121 W. FORSYTH ST., S	11b. City, State & Zip Code JACKSONVILLE FL 32202	11c. Registration/Document Number P93000073514 B97000000103
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Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

Regency Centers L.P. by Regency Realty Corporation

DATE 12-14-98

Typed or Printed Name of General Partner Signing Form

J. Christian Leavitt, Vice President

Daytime Telephone Number 904/356-7000

CR2E003 (8/98)