2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000060167

Entity Name: REGENCY REALTY COLORADO, INC

121 WEST FORSYTH ST., STE. 200

() Delete

1699 SOUTH COLORADO BLVD SUITE M

JACKSONVILLE, FL 32202

WOODWARD, WILLIAM B

DENVER, CO 80222

Address: City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

FILED Apr 19, 2007 Secretary of State

Entity Nai	me: REGEI	NCY REALTY COL	.ORADO, INC.						
Current Principal Place of Business:				New Princi	New Principal Place of Business:				
121 WEST FORSYTH STREET SUITE 200 JACKSONVILLE, FL 32202				ONE INDEPENDENT DRIVE SUITE 114 JACKSONVILLE, FL 32202 US					
Current M	lailing Addı	New Mailir	New Mailing Address:						
121 WEST FORSYTH STREET SUITE 200 JACKSONVILLE, FL 32202				ONE INDEPENDENT DRIVE SUITE 114 JACKSONVILLE, FL 32202 US					
FEI Number:	: 59-3659656	FEI Number Ap	olied For() FEI	Number Not Appli	cable ()	Certif	icate of Status De	esired ()	
Name and Address of Current Registered Agent:				Name and	Name and Address of New Registered Agent:				
SUITE 130 JACKSON	PENDENT 00 VILLE, FL 3	32202 US	ement for the purpos	se of changing it	s registers	ed office o	r registered ag	ent or both	
	of Florida.	ty subillits tills stat	ement for the purpos	se or changing it	s registere	ed office o	r registered agi	ent, or both,	
SIGNATU	RE:								
Electronic Signature of Registered Agent					Date				
Election Car	npaign Financ	ing Trust Fund Cont	ribution ().						
OFFICERS AND DIRECTORS:				ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS				
Title: Name: Address: City-St-Zip:		()Delete TIN E JR FORSYTH STREET SU LLE, FL 32202	ITE 200	Title: Name: Address: City-St-Zip:	D STEIN, MAI ONE INDER JACKSON	RTÍN E JR PENDENT D	e () Addition RIVE, SUITE 114 2202 US		
Title: Name: Address: City-St-Zip:	FIALA, MAR 121 WEST F	() Delete Y LOU FORSYTH STREET SU LLE, FL 32202	ITE 200	Title: Name: Address: City-St-Zip:	D FIALA, MAR ONE INDER JACKSON	RY LOU PENDENT D	e()Addition RIVE, SUITE 114 2202 US		
Title: Name:	VP MILLER, KA	()Delete THY		Title: Name:	VP MILLER, KA		e () Addition		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

ONE INDEPENDENT DRIVE, SUITE 114

() Change () Addition

JACKSONVILLE, FL 32202 US

SIGNATURE: KATHY D. MILLER VP 04/19/2007