2012 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P93000047823

Entity Name: REGENCY CENTERS CORPORATION

FILED Dec 03, 2012 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

ONE INDEPENDENT DRIVE

SUITE 114

JACKSONVILLE, FL 322025019 US

Current Mailing Address: New Mailing Address:

ONE INDEPENDENT DRIVE SUITE 114

JACKSONVILLE, FL 322025019 US

FEI Number: 59-3191743 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New 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

OFFICERS AND DIRECTORS:

Title: CEO

Name: STEIN, MARTIN E JR

Address: ONE INDEPENDENT DRIVE, SUITE 114
City-St-Zip: JACKSONVILLE, FL 322025019 US

Title: S VP

Name: MILLER, KATHY D

Address: ONE INDEPENDENT DRIVE, SUITE 114
City-St-Zip: JACKSONVILLE, FL 322025019 US

Title: S VP Name: LEAVITT, J C

Address: ONE INDEPENDENT DRIVE, SUITE 114
City-St-Zip: JACKSONVILLE, FL 322025019 US

Title: VP

Name: THOMPSON, JAMES D

Address: ONE INDEPENDENT DRIVE, SUITE 114
City-St-Zip: JACKSONVILLE, FL 322025019 US

Title: VP

Name: HOFHEIMER, NORMAN A JR

Address: ONE INDEPENDENT DRIVE, SUITE 114
City-St-Zip: JACKSONVILLE, FL 322025019 US

Title: SEC

Name: JOHNSTON, BARBARA C

Address: ONE INDEPENDENT DRIVE, SUITE 114
City-St-Zip: JACKSONVILLE, FL 322025019 US

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 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 all other like empowered.

SIGNATURE: KATHY D. MILLER SVP 12/03/2012

regency centers

FACSIMILE

To:	Robin Easom	Date:	12/03/2012	
Company:	Florida Department of State Division of Corporations	Pages:	,	
Fax:	850.245.6017		(including this one)	
From:	Cynthia Guess, Tax Associate		r ee we	
Subject:	Regency Centers Corporation P93000047823			

Good morning Robin,
And thank you for your help.
Please add a 7th Officer to:
Regency Centers, Corporation
Document Number: P93000047823

Officer to add = Michael R. Kinsella, SVP - Sr. Market Officer

Please note that I have filed and paid an amended return on this day in order to have this officer added.

Confirmation number = 800242368488

Please let me know if you need any further information in order to add this officer.

Thank you,

Cynthia Guess, Tax Associate 904.598.7633 Phone 904.354.1832 fax cguess@regencycenters.com

Regency Centers.

One Independent Dr. I Suite 114 I Jacksonville | FL 32202 Direct : 904.598.7633 I Fax:904.354.1832 cynthiaguess@regencycenters.com