

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL	
OMB Number:	3235-0287
Estimated average burden hours per response:	0.5

1. Name and Address of Reporting Person* <u>LUKE DOUGLAS S</u> (Last) (First) (Middle) <u>C/O HL CAPITAL, INC.</u> <u>405 LEXINGTON AVENUE, 48TH FLOOR</u> (Street) <u>NEW YORK NY 10174</u> (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>REGENCY CENTERS CORP [REG]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director 10% Owner Officer (give title below) Other (specify below)
	3. Date of Earliest Transaction (Month/Day/Year) <u>05/17/2011</u>	
	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Common Stock	05/17/2011		M		2,159 ⁽¹⁾	A	\$0	58,033	D	
Common Stock	05/17/2011		M		290 ⁽²⁾	A	\$0	58,323	D	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	V	(A)	(D)	Date Exercisable	Expiration Date						Amount or Number of Shares
Restricted Stock (2007 Grant)	\$0	05/17/2011		M			659	(1)	(1)	Common Stock	659	\$0	0	D	
Restricted Stock (2008 Grant)	\$0	05/17/2011		M			500	(1)	(1)	Common Stock	500	\$0	500	D	
Restricted Stock (2009 Grant)	\$0	05/17/2011		M			500	(1)	(1)	Common Stock	500	\$0	1,000	D	
Restricted Stock (2010 Grant)	\$0	05/17/2011		M			500	(1)	(1)	Common Stock	500	\$0	1,500	D	
Dividend Equivalent Rights	(3)	05/17/2011		M			290	(4)	(4)	Common Stock	290	\$0	0	D	

Explanation of Responses:

- Vesting of restricted stock grant. Shares vest 25% per year beginning on the first anniversary of the date of grant.
- Settlement of dividend equivalent units which accrued upon vesting of restricted stock.
- 1-for-1 based upon dividends related to the underlying restricted stock.
- The dividend equivalents settle on vesting of restricted stock granted pursuant to Regency's Long Term Omnibus Plan.

Remarks:

/s/ Michael B. Kirwan,
Attorney-in-Fact for Douglas 05/19/2011
S. Luke

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.

