## Edgar Filing: EQUITY LIFESTYLE PROPERTIES INC - Form 4/A

EQUITY LIFESTYLE PROPERTIES INC Form 4/A February 14, 2008 OMB APPROVAL FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB 3235-0287 Washington, D.C. 20549 Number: Check this box January 31, Expires: if no longer 2005 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF subject to Estimated average **SECURITIES** Section 16. burden hours per Form 4 or response... 0.5 Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction 1(b). (Print or Type Responses) 1. Name and Address of Reporting Person \* 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading **ROSENBERG SHELIZ** Issuer Symbol EQUITY LIFESTYLE (Check all applicable) **PROPERTIES INC [ELS]** (Last) (First) (Middle) 3. Date of Earliest Transaction X\_ Director 10% Owner Other (specify Officer (give title (Month/Day/Year) below) below) TWO NORTH RIVERSIDE 05/15/2007 PLAZA, SUITE 600 (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) \_X\_ Form filed by One Reporting Person 05/16/2007 \_ Form filed by More than One Reporting CHICAGO, IL 60606 Person (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1. Title of 2. Transaction Date 2A. Deemed 3. 4. Securities Acquired 5. Amount of 6. Ownership 7. Nature of Security (Month/Day/Year) Execution Date, if Transaction(A) or Disposed of Securities Form: Direct Indirect (Instr. 3) any Code (D)Beneficially (D) or Beneficial (Instr. 3, 4 and 5) Ownership (Month/Day/Year) (Instr. 8) Owned Indirect (I) Following (Instr. 4) (Instr. 4) Reported (A) Transaction(s) or (Instr. 3 and 4) Price Code V Amount (D) Common A<sup>(1)</sup> Stock, par 05/15/2007 2.000 D А 116,135 53.3 value \$.01

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

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 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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| 1. Title of<br>Derivative | 2.<br>Conversion | 3. Transaction Date<br>(Month/Day/Year) |                  | 4.<br>Transacti | 5.<br>onNumber                  | 6. Date Exer<br>Expiration D |            | 7. Tit<br>Amou | le and<br>int of | 8. Price of<br>Derivative | 9. Nu<br>Deriv |
|---------------------------|------------------|---|------------------|-----------------|---------------------------------|------------------------------|------------|----------------|------------------|---------------------------|----------------|
| Security                  | or Exercise      | ( · · · · · · · · · · · · · · · · · · · | any              | Code            | of                              | (Month/Day                   |            |                | rlying           | Security                  | Secu           |
| (Instr. 3)                | Price of         |   | (Month/Day/Year) | (Instr. 8)      | Derivativ                       | · ·                          |            | Secur          |                  | (Instr. 5)                | Bene           |
|                           | Derivative       |   |                  |                 | Securities                      |                              |            | (Instr         | . 3 and 4)       |                           | Owne           |
|                           | Security         |   |                  |                 | Acquired                        |                              |            |                |                  |                           | Follo          |
|                           |                  |   |                  |                 | (A) or<br>Disposed              |                              |            |                |                  |                           | Repo           |
|                           |                  |   |                  |                 |                                 |                              |            |                |                  |                           | Trans          |
|                           |                  |   |                  |                 | of (D)                          |                              |            |                |                  |                           | (Instr         |
|                           |                  |   |                  |                 | (Instr. 3, $4 \text{ and } 5$ ) |                              |            |                |                  |                           |                |
|                           |                  |   |                  |                 | 4, and 5)                       |                              |            |                |                  |                           |                |
|                           |                  |   |                  |                 |                                 |                              |            |                | Amount           |                           |                |
|                           |                  |   |                  |                 |                                 | Date                         | Expiration |                | or               |                           |                |
|                           |                  |   |                  |                 |                                 | Exercisable                  | Date       | Title          | Number           |                           |                |
|                           |                  |   |                  | Code V          | $(\Lambda)$ (D)                 |                              |            |                | of<br>Sharaa     |                           |                |
|                           |                  |   |                  | Code V          | (A) (D)                         |                              |            |                | Shares           |                           |                |
|                           |                  |   |                  |                 |                                 |                              |            |                |                  |                           |                |
| Repor                     | rtina O          | wners                                   |                  |                 |                                 |                              |            |                |                  |                           |                |

## reporting **J WI ICI 3**

| Reporting Owner Name / Address   | Relationships |           |         |       |  |  |  |  |
|--|---------------|-----------|---------|-------|--|--|--|--|
|  | Director      | 10% Owner | Officer | Other |  |  |  |  |
| ROSENBERG SHELI Z<br>FWO NORTH RIVERSIDE PLAZA<br>SUITE 600<br>CHICAGO, IL 60606 | Х             |           |         |       |  |  |  |  |
| Signatures   |               |           |         |       |  |  |  |  |
| By: Ellen Kelleher by Power of Atty. Rosenberg                                   | 02/14/2008    |           |         |       |  |  |  |  |
| <b>**</b> Signature of Reporting Pers  |               | Date      |         |       |  |  |  |  |

## **Explanation of Responses:**

- \* 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).
- (1) Subject to vesting as follows: 1/3 on 11/15/07, 1/3 on 5/15/08, 1/3 on 5/15/09.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.