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**Apr 14 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # F93000003087 (4)
1. Corporation Name
EQR-BRETON HAMMOCKS VISTAS, INC.



Principal Place of Business: **C/O ANN M. SCHNEIDER, 2 N. RIVERSIDE PLAZA, CHICAGO IL 60606 US**

Mailing Address: **C/O ANN M. SCHNEIDER, 2 N. RIVERSIDE PLAZA, CHICAGO IL 60606-2600 US**

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-28) fields with sub-fields for Suite, City & State, Zip, and Country.

3. Date Incorporated or Qualified: **07/06/1993**

3a. Date of Last Report: **03/04/1996**

4. FEI Number: **36-3907873**

5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
THE PRENTICE-HALL CORPORATION SYSTEM INC., 1201 HAYS STREET, SUITE 105, TALLAHASSEE FL 32301

81 Name, 82 Street Address, 83, 84 City, 85 Zip Code (FL)

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation 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 the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ DATE: _____
(NOTE: Registered Agent signature required when reinstating)

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|-------------------------|---|---|
| TITLE | AS | 1.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | KOSFELD, MARLENE | 1.2 NAME | |
| STREET ADDRESS | 2 NORTH RIVERSIDE PLAZA | 1.3 STREET ADDRESS | |
| CITY - ST - ZIP | CHICAGO IL | 1.4 CITY - ST - ZIP | |
| TITLE | V | 2.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | PHIPPS, JAMES M. | 2.2 NAME | |
| STREET ADDRESS | 2 NORTH RIVERSIDE PLAZA | 2.3 STREET ADDRESS | |
| CITY - ST - ZIP | CHICAGO IL | 2.4 CITY - ST - ZIP | |
| TITLE | TV | 3.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | GREENBERG, ARTHUR A | 3.2 NAME | |
| STREET ADDRESS | 2 NORTH RIVERSIDE PLAZA | 3.3 STREET ADDRESS | |
| CITY - ST - ZIP | CHICAGO IL | 3.4 CITY - ST - ZIP | |
| TITLE | PD | 4.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | LIEBENTRITT, DONALD J | 4.2 NAME | |
| STREET ADDRESS | 2 NORTH RIVERSIDE PLAZA | 4.3 STREET ADDRESS | |
| CITY - ST - ZIP | CHICAGO IL | 4.4 CITY - ST - ZIP | |
| TITLE | S | 5.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | SCHNEIDER, ANN M | 5.2 NAME | |
| STREET ADDRESS | 2 NORTH RIVERSIDE PLAZA | 5.3 STREET ADDRESS | |
| CITY - ST - ZIP | CHICAGO IL 60606 | 5.4 CITY - ST - ZIP | |
| TITLE | D | 6.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | STEVENS, STANLEY M | 6.2 NAME | |
| STREET ADDRESS | 2 NORTH RIVERSIDE PLAZA | 6.3 STREET ADDRESS | |
| CITY - ST - ZIP | CHICAGO IL 60606 | 6.4 CITY - ST - ZIP | |

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ Ann M. Schneider Secretary 4/4/97 312-466-3607

CR2E034 (9/96)