

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000003087

FILED
Apr 11, 2015
Secretary of State
CC7435007469

Entity Name: EQR-BRETON HAMMOCKS VISTAS, INC.

Current Principal Place of Business:

TWO NORTH RIVERSIDE PLAZA, SUITE 400
CHICAGO, IL 60606

Current Mailing Address:

TWO NORTH RIVERSIDE PLAZA, SUITE 400
CHICAGO, IL 60606 US

FEI Number: 36-3907873

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
FORT LAUDERDALE, FL 33324 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

Officer/Director Detail :

Title PRESIDENT, DIRECTOR
Name CRIZ, JESSE
Address TWO NORTH RIVERSIDE PLAZA,
 SUITE 400
City-State-Zip: CHICAGO IL 60606

Title SECRETARY, TREASURER,
 DIRECTOR
Name GREENBERG, ARTHUR A.
Address TWO NORTH RIVERSIDE PLAZA,
 SUITE 400
City-State-Zip: CHICAGO IL 60606

Title VP, ASSISTANT SECRETARY
Name MAHER, CHRISTOPHER A.
Address TWO NORTH RIVERSIDE PLAZA,
 SUITE 400
City-State-Zip: CHICAGO IL 60606

Title DIRECTOR
Name NESTI, PATRICIA
Address TWO NORTH RIVERSIDE PLAZA,
 SUITE 400
City-State-Zip: CHICAGO IL 60606

Title DIRECTOR
Name PHIPPS, JAMES M.
Address TWO NORTH RIVERSIDE PLAZA,
 SUITE 400
City-State-Zip: CHICAGO IL 60606

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: CHRISTOPHER A. MAHER

**VP, ASSISTANT
SECRETARY**

04/11/2015

Electronic Signature of Signing Officer/Director Detail

Date