

**2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F94000005681

**Entity Name:** EQR-PARADISE POINTE VISTAS, INC.

**Current Principal Place of Business:**

2 N RIVERSIDE PLAZA  
SUITE 400  
CHICAGO, IL 60606

**Current Mailing Address:**

2 N RIVERSIDE PLAZA  
SUITE 400  
CHICAGO, IL 60606 US

**FEI Number:** 36-3990119

**Certificate of Status Desired:** No

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

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND RD.  
PLANTATION, 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 PD  
Name CRIZ, JESSE  
Address TWO N RIVERSIDE PLAZA  
City-State-Zip: CHICAGO IL 60606

Title V  
Name NESTI, PATRICIA  
Address 2 N. RIVERSIDE PLAZA  
City-State-Zip: CHICAGO IL

Title T  
Name GREENBERG, ARTHUR  
Address 2 N. RIVERSIDE PLAZA  
City-State-Zip: CHICAGO IL

Title VD  
Name PHIPPS, JAMES  
Address 2 N RIVERSIDE PLAZA  
City-State-Zip: CHICAGO IL 60606

Title VAS  
Name LAPELLE, MICHELLE  
Address TWO N RIVERSIDE PLAZA  
City-State-Zip: CHICAGO IL 60606

Title VSD  
Name GREENBERG, ARTHUR  
Address TWO N RIVERSIDE PLAZA  
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:** MICHELLE LAPELLE

VAS

04/12/2013

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date