

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000005858

FILED  
Apr 25, 2006  
Secretary of State

Entity Name: EQUITY RESIDENTIAL PROPERTIES MANAGEMENT CORP.

## Current Principal Place of Business:

ATTN: BARBARA SHUMAN  
TWO NORTH RIVERSIDE PLAZA, SUITE 400  
CHICAGO, IL 60606

## New Principal Place of Business:

## Current Mailing Address:

ATTN: BARBARA SHUMAN  
TWO NORTH RIVERSIDE PLAZA, SUITE 400  
CHICAGO, IL 60606

## New Mailing Address:

FEI Number: 36-3899384

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

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

## Name and Address of New 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:

04/25/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: V ( ) Delete  
Name: GAST, MICHAEL  
Address: TWO NORTH RIVERSIDE PLAZA, SUITE 400  
City-St-Zip: CHICAGO, IL 60606

Title: VAS ( ) Delete  
Name: MATZ, JANE  
Address: TWO NORTH RIVERSIDE PLAZA, SUITE 400  
City-St-Zip: CHICAGO, IL 60606

Title: VAS ( ) Delete  
Name: DUWE, YASMINA  
Address: TWO NORTH RIVERSIDE PLAZA, SUITE 400  
City-St-Zip: CHICAGO, IL 60606

Title: S ( ) Delete  
Name: SHUMAN, BARBARA  
Address: TWO NORTH RIVERSIDE PLAZA, SUITE 400  
City-St-Zip: CHICAGO, IL 60606

Title: V ( ) Delete  
Name: WETZEL, MARK  
Address: TWO NORTH RIVERSIDE PLAZA, SUITE 400  
City-St-Zip: CHICAGO, IL 60606

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P ( ) Change (X) Addition  
Name: SPECTOR, GERALD  
Address: TWO N. RIVERSIDE PLAZA, STE. 400  
City-St-Zip: CHICAGO, IL 60606

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BARBARA SHUMAN

S

04/25/2006

Electronic Signature of Signing Officer or Director

Date