FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* BERMAN MICHAEL BRUCE					2. Issuer Name and Ticker or Trading Symbol EQUITY LIFESTYLE PROPERTIES INC [ELS]									(Check all		applicable) Pirector		Person(s) to Issuer 10% Owner Other (specify	
•	,	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 04/01/2008									Λ		,	below)` e President & CI		
IL (Sta				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)										vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
Di			Date	ate		2A. Deemed Execution Date, if any (Month/Day/Year)				Disposed				1 and Secur Benef Owne		ties cially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)
								Code	v	Amount		(A) or (D)	Price	Trans		action(s)			(111341.4)
Common Stock, par value \$.01 04/01				2008						25		A	\$39.2		59,942.88		D		
Common Stock, par value \$.01															120.3		I		by 401K Plan
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
erivative Conversion Date Execution D or Exercise (Month/Day/Year) if any			Date,	Code (Instr. 8)		of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration Date (Month/Day/Year) Date Expiration			Amoun or Numbe of			t		derivative Securities Beneficially Owned Following Reported	Own Forn Direc or In (I) (Ir	: t (D) direct	11. Nature of Indirect Beneficial Ownership (Instr. 4)
H DOC DOC E	MICH (First IURON IL (State rity (Instruct) ck, par v	(First) (I IURON STREET IL 6 (State) (Z Tablerity (Instr. 3) Ck, par value \$.01 Ck, par value \$.01 Ta Ta Tanversion Exercise (Month/Day/Year) (Month/Day/Year)	(First) (Middle) IURON STREET IL 60610 (State) (Zip) Table I - Nor rity (Instr. 3) Ck, par value \$.01 Ck, par value \$.01 Table II - E (Intercise ce of ivative in the content of	MICHAEL BRUCE (First) (Middle) IURON STREET IL 60610 (State) (Zip) Table I - Non-Derivation (Month/D) ck, par value \$.01 Table II - Derivation (e.g., putative see of ivative surity) 3. Transaction Date (Month/Day/Year) (Month/Day/Year) 3. Transaction Date (if any (Month/Day/Year))	MICHAEL BRUCE (First) (Middle) IURON STREET IL 60610 (State) (Zip) Table I - Non-Derivative rity (Instr. 3) 2. Transaction Date (Month/Day/Year) ck, par value \$.01 Table II - Derivative Sc (e.g., puts, c. e.g., puts, c. e.g. (Month/Day/Year) Inversion Date (Month/Day/Year) A. If 3. Deemed Execution Date, if any (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year)	MICHAEL BRUCE (First) (Middle) (IURON STREET IL 60610 (State) (Zip) Table I - Non-Derivative Serity (Instr. 3) Ck, par value \$.01 Table II - Derivative Secure, (e.g., puts, calls and care if any (Month/Day/Year) Tansaction Date (Month/Day/Year) Table II - Derivative Secure, (e.g., puts, calls and care if any (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (First) (Middle) 3. Date of 04/01/2008 2. Transaction Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year)	(First) (Middle) (IURON STREET Table I - Non-Derivative Securities (Month/Day/Year) Table II - Derivative Securities (e.g., puts, calls, warr (Month/Day/Year) Table II - Derivative Securities (e.g., puts, calls, warr (Month/Day/Year) Table III - Derivative Securities (e.g., puts, calls, warr (Month/Day/Year) Table III - Derivative Securities (e.g., puts, calls, warr (Month/Day/Year) Table III - Derivative Securities (e.g., puts, calls, warr (Month/Day/Year) Table III - Derivative Securities (e.g., puts, calls, warr (Month/Day/Year) Table III - Derivative Securities (e.g., puts, calls, warr (Month/Day/Year) Table III - Derivative Securities (e.g., puts, calls, warr (Month/Day/Year) Table III - Derivative Securities (e.g., puts, calls, warr (Month/Day/Year) Table III - Derivative Securities (e.g., puts, calls, warr (Month/Day/Year) Table III - Derivative Securities (e.g., puts, calls, warr (Month/Day/Year) Table III - Derivative Securities (e.g., puts, calls, warr (Month/Day/Year) Table III - Derivative Securities (e.g., puts, calls, warr (Month/Day/Year) Table III - Derivative Securities (e.g., puts, calls, warr (Month/Day/Year)	MICHAEL BRUCE (First) (Middle) IURON STREET Table I - Non-Derivative Securities Acquired (A) or Disposed of (D) (Month/Day/Year) Table II - Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) EQUITY LIFES [ELS] 3. Date of Earliest Transactor 24/01/2008 4. If Amendment, Date of Execution Date 24/01/2008 2. Transaction Date 25/01/2008 2. Transaction Date 26/01/2008 Table II - Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	Code Ck, par value \$.01 Ck, par value \$.01	Code (Instr. 3) Code (Instr. 3) Code (Instr. 4) Code (Instr. 4) Code (Instr. 5) Code (Instr. 6) Code (Inst	Code V Amount Ck, par value \$.01 Ck, par	Code V Amount Code Code V Amount Code Co	Code V Amount Code Name Code C	Code V Amount Code C	Check Code Code	Check all applied Chec	Check all applicable Director Cofficer (give title below)	Check all applicable Check all all all all all all all all all al	Check all applicables Director 10% of Check all applicables Director Now of Check all applicables Director Disposed of Or Disposed of Or Disposed of Or Disposed of Or Dis

Explanation of Responses:

By: Ellen Kelleher by Power of

Attorney For: Michael B. 04/01/2008

<u>Berman</u>

** Signature of Reporting Person Date

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

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.

^{*} 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).