FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

JII, D.C. 20049	OMB APPROVAL					
IN DENEEICIAL OWNEDSHID	OMB Number:	3235-028				

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

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

1. Name and Address of Reporting Person*  KELLEHER ELLEN				2. Issuer Name <b>and</b> Ticker or Trading Symbol EOUITY LIFESTYLE PROPERTIES INC										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
KLILLL	MILTIC LIL	LLIN			ELS	s ]										Direc			10% O	-
(Last)	(Fi	ret) (	Middle)												X	belov	er (give title v)		below)	specify
(Last) (First) (Middle) TWO NORTH RIVERSIDE PLAZA				3. Date of Earliest Transaction (Month/Day/Year) 02/28/2005										Exe	VP - Gen	eral (	Counsel a	nd		
SUITE 8					02/28	5/200.	,													
					4. If A	mendn	nent, Dat	te of	Original	Filed	(Month/Da	ay/Yea	r)			/idual o	r Joint/Group	Filin	g (Check A	pplicable
(Street)															ine) X	Fa	filed by One	. D	artina Dara	
CHICAC	iO IL	•	50606														Form filed by One Reporting Person  Form filed by More than One Reporting			
																Pers		e lilai	п опе кер	orung
(City)	(St	ate) (	Zip)																	
		Tabl	e I - No	n-Deriva	ative S	Secur	ities A	4cq	uired,	Dis	posed o	f, or	Bei	nefici	ally	Owne	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)			ay/Year) Exe		A. Deemed Execution Date, f any		3. Transaction Code (Instr.							5. Amount of Securities Beneficially		6. Ownership Form: Direct (D) or Indirect		7. Nature of Indirect Beneficial		
						(Mon	(Month/Day/Year)		8)							Owned Following Reported		(I) (Instr. 4)		Ownership (Instr. 4)
									Code	v	Amount	(4	A) or D)	Price	e		action(s) 3 and 4)			
Common	Stock, par	value \$.01		02/28/	2005				J		122.85	5	A	\$33	3.96	6   1701 XX			by 401K Plan	
Common	Stock, par	value \$.01													55,871 D				D	
Common	Stock, par	value \$.01														207,142 I				*(1)
		Та						•			sed of, onvertib				•	wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		I. Transacti Code (Ins	ion constraint of the str.	n of		6. Date E Expiratio (Month/D	n Date		7. Title and Amount of Securities Underlying Derivative Security (Instrand 4)		of s ig g e Instr. 3	Deri Seci	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction( (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Ownership Form: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
													or	mount r						

## **Explanation of Responses:**

1. Shares reported herein are beneficially owned by The Security Trust Company as Trustee of the Manufactured Home Communities, Inc. Supplemental Employees Retirement Plan for the benefit of the Reporting Person.

(A) (D)

Date Exercisable Expiration

Date

By: Jennifer L. Usher, by Power of Atty. For: Ellen

of

Shares

03/01/2005

Date

Kelleher

Title

\*\* Signature of Reporting Person

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

- $^{\star}$  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).

Code V

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.