FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

obligations may continue. See Instruction 1(b). 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* MAYNARD ROGER						2. Issuer Name and Ticker or Trading Symbol EQUITY LIFESTYLE PROPERTIES INC [ELS]										(Check	all ap	p of Reportin plicable) ctor er (give title	109	o Issuer % Owner er (specify	
(Last) 14578 RI	ast) (First) (Middle) 4578 RIVER BEACH DRIVE, #511						3. Date of Earliest Transaction (Month/Day/Year) 12/10/2004										X Office (give tide of the (specify below) Chief Operating Officer				
(Street) PORT CHARLOTTE FL 33953						4. If Amendment, Date of Original Filed (Month/Day/Year)										Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(St	ate) (Zip)														1 010				
		Tabl	e I - Noi	n-Deri	vative	Se	ecuri	ities	Acq	uired,	Dis	posed o	f, oı	r Be	enefic	ially	Own	ed			
Dat				2. Transaction Date (Month/Day/Year)			2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dispo		Disposed	rities Acquired (A) ed Of (D) (Instr. 3,			4 and Secu Bene Own		icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)		or Pri	ce	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Common Stock, par value \$.01 12/10/					0/2004	2004			J ⁽¹⁾		10,00	0	D		\$0 2		4,000	D			
Common Stock, par value \$.01				12/1	0/2004	0/2004				J ⁽¹⁾		10,00	0	A \$0		\$ <mark>0</mark>	17,394		I	*(2)	
Common Stock, par value \$.01																06.63	I	by 401K Plan			
		Та	able II - I)									sed of, onvertib					vned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date,	Code (Inst		on of		6. Date E: Expiration (Month/D	n Date	е	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		of es ing /e	Deri Sec (Inst	rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)		
					Code	v	(4	A) (D)		Date Exercisal		Expiration Date	Title	0 N	Amount or Number of Shares						

Explanation of Responses:

- 1. Reports shares which were contributed to the Manufactured Home Communities, Inc. Employee Supplemental Retirement Account (direct to indirect position).
- 2. 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.

By: Jennifer Usher by power of attorney For: Roger A. 12/10/2004 Maynard

** Signature of Reporting Person Date

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

- * 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).

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.