

1.) CORPORATION NAME:

**Enterprise Community Partners, Inc.**

DUE DATE: **2/28/2011**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

**AUTH IN VI  
CORPORATION SERVICE COMPANY  
11 S 12TH ST  
PO BOX 1463**

SCC ID NO: **F1166497**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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**RICHMOND, VA 23218**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**MD**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 10227 WINCOPIN CIR STE 500

CITY/ST/ZIP: COLUMBIA, MD 21044-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	WILLIAM F FREY	
TITLE:	SR VP	
ADDRESS:	80 FIFTH AVENUE 6TH FLOOR	
CITY/ST/ZIP/CO:	NEW YORK, NY 10011-8002	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	TERRI LUDWIG	
TITLE:	PRES/CEO	
ADDRESS:	10227 WINCOPIN CIRCLE STE 500	
CITY/ST/ZIP/CO:	COLUMBIA, MD 21044-	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	PATRICIA ROUSE	
TITLE:	VP	
ADDRESS:	10227 WINCOPIN CIR STE 500	
CITY/ST/ZIP/CO:	COLUMBIA, MD 21044-	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	J. RONALD TERWILLIGER	
TITLE:	CHAIRMAN	
ADDRESS:	10227 WINCOPIN CIR, STE 500	
CITY/ST/ZIP/CO:	COLUMBIA, MD 21044-	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	FAITH E THOMAS	
TITLE:	VP/GC/SEC	
ADDRESS:	10227 WINCOPIN CIRCLE SUITE 500	
CITY/ST/ZIP/CO:	COLUMBIA, MD 21044-	

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL MCNEELY SVP, TREASURER 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	NAOMI BAYER SVP 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LORI CHATMAN SVP 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PAUL CUMMINGS SVP 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ANTHONY DI SPIGNO SVP 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ALAZNE SOLIS SVP 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	A. SCOTT ANDERSON SVP 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ALEX AVITABILE VICE PRESIDENT 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DANA BOURLAND VICE PRESIDENT 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DAVID BOWERS VICE PRESIDENT 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CHRISTINE CARTALES VICE PRESIDENT 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JEANETTE DAYMUDE VICE PRESIDENT 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KEITH FAIREY VICE PRESIDENT 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RICHARD GROSS VICE PRESIDENT 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROBERT GROSSINGER VICE PRESIDENT 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	AMALIA KASTBERG VICE PRESIDENT 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KAREN LADO VICE PRESIDENT 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KAREN LADO VICE PRESIDENT 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARY ANN LEONARD VICE PRESIDENT 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARK MCDERMOTH VICE PRESIDENT 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LAURA MCGRTATH VICE PRESIDENT 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PETRA MONTAGUE VICE PRESIDENT 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	EDWARD ROSENTHAL VICE PRESIDENT 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JEFFREY SCHAFFER VICE PRESIDENT 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ABBY JO SIGAL VICE PRESIDENT 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KRISTIN SIGLIN VICE PRESIDENT 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KATIE SWENSON VICE PRESIDENT 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHELLE WHETTEN VICE PRESIDENT 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PRISCILLA ALMODOVAR TRUSTEE 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GREGORY BAER TRUSTEE 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	BILL BECKMANN TRUSTEE 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOSEPH BROWN TRUSTEE 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RAYMOND CHRISTMAN TRUSTEE 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RICHARD COLES TRUSTEE 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SHEILA CROWLEY TRUSTEE 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ADAM FLATTO TRUSTEE 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DORA LEONG GALLO TRUSTEE 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ALICIA GLEN TRUSTEE 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RONALD GRZYWINSKI TRUSTEE 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RICK LAZIO TRUSTEE 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DONNA MILORD TRUSTEE 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CAROL PARRY TRUSTEE 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	FRANKLIN RAINES TRUSTEE 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	NICOLAS RETSINAS TRUSTEE 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JONATHAN ROSE TRUSTEE 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL ROTH TRUSTEE 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	TONY SALAZAR TRUSTEE 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RONALD TERWILLIGER CHAIRMAN 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CHARLES WERHANE TRUSTEE 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	REGINALD WILLIAMS TRUSTEE 10227 WINCOPIN CIR, STE 500 COLUMBIA, MD 21044-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME:	BARRY ZIGAS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TRUSTEE		
ADDRESS:	10227 WINCOPIN CIR, STE 500		
CITY/ST/ZIP/CO:	COLUMBIA, MD 21044-		

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

<u>/s/ FAITH E THOMAS</u>	<u>FAITH E THOMAS, VP/GC/SEC</u>	<u>2/25/2011</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.