

1.) CORPORATION NAME:

Home Properties, Inc.

DUE DATE: **3/31/2012**

SCC ID NO: **F1328873**

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

AUTH IN VI

CT CORPORATION SYSTEM

4701 COX RD STE 301

GLEN ALLEN, VA 23060

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	80,000,000
PREFER	10,000,000
OTH	10,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

MD

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 850 CLINTON SQ

CITY/ST/ZIP: ROCHESTER, NY 14604-

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.

NAME: EDWARD J PETTINELLA
TITLE: P/CEO
ADDRESS: 850 CLINTON SQ
CITY/ST/ZIP/CO: ROCHESTER, NY 14604-

OFFICER

DIRECTOR

NAME: ANN M MC CORMICK
TITLE: EVP/S/GEN COU
ADDRESS: 850 CLINTON SQUARE
CITY/ST/ZIP/CO: ROCHESTER, NY 14604-

OFFICER

DIRECTOR

NAME: DAVID P GARDNER
TITLE: EVP/CFO
ADDRESS: 850 CLINTON SQUARE
CITY/ST/ZIP/CO: ROCHESTER, NY 14604-

OFFICER

DIRECTOR

NAME: STEVEN R BLANK
TITLE: DIRECTOR
ADDRESS: 850 CLINTON SQUARE
CITY/ST/ZIP/CO: ROCHESTER, NY 14604-

OFFICER

DIRECTOR

NAME: ALAN L GOSULE
TITLE: DIRECTOR
ADDRESS: 850 CLINTON SQUARE
CITY/ST/ZIP/CO: ROCHESTER, NY 14604-

OFFICER

DIRECTOR

NAME: LEONARD F HELBIG, III TITLE: DIRECTOR ADDRESS: 850 CLINTON SQUARE CITY/ST/ZIP/CO: ROCHESTER, NY 14604-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: CHARLES J KOCH TITLE: DIRECTOR ADDRESS: 850 CLINTON SQUARE CITY/ST/ZIP/CO: ROCHESTER, NY 14604-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: THOMAS P LYDON, JR TITLE: DIRECTOR ADDRESS: 850 CLINTON SQUARE CITY/ST/ZIP/CO: ROCHESTER, NY 14604-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: CLIFFORD W SMITH, JR TITLE: DIRECTOR ADDRESS: 850 CLINTON SQUARE CITY/ST/ZIP/CO: ROCHESTER, NY 14604-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: AMY L TAIT TITLE: DIRECTOR ADDRESS: 850 CLINTON SQUARE CITY/ST/ZIP/CO: ROCHESTER, NY 14604-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
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.	
/s/ ANN M MC CORMICK _____ SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	ANN M MC CORMICK, EVP/S/GEN _____ COU PRINTED NAME AND CORPORATE TITLE
2/28/2012 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.	