## FORM 5

Check this box if no longer subject to

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549	Washington,	D.C.	20549
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OMB APPROVAL								
OMB Number:	3235-0362							
Estimated average	burden							

hours per response:

	Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).
$\Box$	Form 3 Holdings Penorted

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	B Holdings Repo	rted.												aro per re		
Form 4	1 Transactions F	Reported.	File	ed pursuant to or Sectior					ities Excha ompany Ac							
ı	nd Address of HER JOSI	f Reporting Person*  2. Issuer Name and Ticker or Trading Symbol  Armada Hoffler Properties, Inc. [ AHH ]				5. Relationship of Reporting Person(s) to Iss (Check all applicable)  X Director 10% Ow										
l		st) (( FFLER PROPEF K AVENUE, SU		3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year)     12/31/2014  4. If Amendment, Date of Original Filed (Month/Day/Year)						belo	,		belov			
(Street) VIRGINI BEACH	IA VA	. 2	3462	4. If Amen	dment	, Date (	of Orig	inai File	d (Month/L	ay/Yeai		For	or Joint/Gro m filed by C m filed by M son	ne Rep	orting Per	son
(City)	(St	ate) (2	Zip)													
		Tabl	e I - Non-Deriv	ative Sec	uritie	es Ac	quire	ed, Dis	sposed (	of, or	Benefic	ially Own	ed			
Date		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.				or Dispose	Securi Benefi	ties	6. Owne Form: (D) or	rship   I Direct   E	7. Nature of ndirect Beneficial Ownership		
							Amount (A) or (D) Price		Price	Issuer'	s Fiscal nstr. 3 and	scal indirect (I)		(Instr. 4)		
Common	Stock		09/25/2014			A		1,3	36(1)	A	\$9.35	.35 4,517 D				
Common	Stock		12/18/2014			A		1,3	19(1)	Α	\$9.47	.47 5,836 D		D		
		Ta	lala II. Davissat	ivo Coour												
				uts, calls,								ly Owned	I			

## **Explanation of Responses:**

1. These shares were issued to the director in lieu of his annual cash retainers.

## Remarks:

/s/ Eric L. Smith, Attorney-infact for Joseph W. Prueher

02/13/2015

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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).

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.