## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

l	OMB APPRO	VAL
l	OMB Number:	3235-0287
	Estimated average burde	en
	hours per response:	0.5

Check this box if no longer subject to Section 16. Form 4 or Form 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*  GRECO ROSEMARIE B						2. Issuer Name and Ticker or Trading Symbol EXELON CORP [ EXC ]									5. Relationship of Rep (Check all applicable) X Director			10% C		Owner
(Last) 10 SOUT 37TH FL	TH DEARB	rst) ORN STREET	(Middle)		03/	3. Date of Earliest Transaction (Month/Day/Year) 03/31/2005										below			Other (specify below)	
(Street)	GO IL		60603		-   4. II -   -	Ame	endmen	t, Date (	of Original	Filed	(Month/D	)ay/Ye	ear)		. Indiv ine) X	Form	filed by On	e Repo	g (Check Ap orting Person One Repo	on
(City)	(SI		(Zip)																	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned  1. Title of Security (Instr. 3)  2. Transaction  3. 4. Securities Acquired (A) or  5. Amount of  6. Ownership  7. Nature of																				
1. Title of S	security (insi	r. 3)		Date			Execution Date, if any (Month/Day/Yea		Code (Inst		n Disposed Of (D) (In					Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount		(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock (Deferred Stock Units) 03/31			./2005	2005		A		322		A	\$46.	.56	8,046(1)			I	By Exelon Directors' Deferred Stock Unit Plan			
Common Stock (Deferred Stock Units)														5,393(2)			I	By PECO Energy Directors' Stock Unit Plan		
Common Stock																2,000			D	
		Т	able II -	Deriva (e.g., p												wned				•
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)	Executio		Date, Transacti Code (Ins		5. Number of		6. Date Ex Expiration Month/Da	Date		Amo Secu Unde Deriv	7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		Dei Sed (Ins	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Securities Owned Following Reported Transactio (Instr. 4)	Owners Form: Direct ( or Indir (I) (Insti	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)		Date Exercisab		xpiration ate	Title		Amount or Number of Shares	nber					
Deferred Comp. Phantom Shares	(3)								(3)		(3)	Com: Sto		(3)			4,671 <sup>(4</sup>	4)	D	

## Explanation of Responses:

- $1. \ Balance \ also \ includes \ 66 \ shares \ acquired \ on \ 03/10/2005 \ through \ the \ automatic \ dividend \ reinvestment \ feature \ of \ Exelon \ plans.$
- 2. Balance also includes 45 shares acquired on 03/10/2005 through the automatic dividend reinvestment feature of Exelon plans.
- 3. Phantom shares held in a multi-fund deferred compensation account to be settled for cash on a 1:1 basis upon the reporting person's termination of employment for any reason. Shares are acquired through regular periodic contributions and the reinvestment of dividend equivalents.
- 4. Balance also includes 40 shares acquired on 03/10/2005 through the automatic dividend reinvestment feature of Exelon plans.

## Remarks:

Scott N. Peters, Attorney in Fact for Rosemarie B. Greco

04/04/2005

\*\* 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.