Edgar Filing: UNIVERSAL INSURANCE HOLDINGS, INC. - Form 4

UNIVERSAI Form 4 April 02, 201	L INSURANCE	HOLDIN	IGS, INC								
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FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMMISSION	OMB Number:	3235-0287		
Check this if no long subject to Section 16 Form 4 or	er STATEN 5.	IENT OF CHANGES IN BENEFICIAL OWNEI SECURITIES						ERSHIP OF	Expires: January 2 Estimated average burden hours per response		
Form 4 orresponse0Form 5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,5obligationssection 17(a) of the Public Utility Holding Company Act of 1935 or Section30(h) of the Investment Company Act of 19401(b).30(h) of the Investment Company Act of 1940											
(Print or Type R	esponses)										
DOWNES SEAN P Symbol UNIVE				r Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer			
				DINGS, INC. [UVE]				(Check all applicable)			
(Month/			3. Date of (Month/Date) (Month/	-				_X_ Director 10% Owner _X_ Officer (give title 0ther (specify below) President and CEO			
				nth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
FORT LAUI	DERDALE, FL	33309						Form filed by Mo Person			
(City)	(State)	(Zip)	Table	e I - Non-De	erivative Se	curities	s Acqu	iired, Disposed of,	or Beneficial	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)	Execution any				(A)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Restricted Common Stock	04/01/2015			Code V A	Amount 500,000	. ,	Price \$ 0	(Instr. 3 and 4) 2,124,361	D		

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

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
		Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
DOWNES SEAN P 1110 WEST COMMERCIAL BOULEVARD FORT LAUDERDALE, FL 33309	Х		President and CEO				
Signatures							

/s/ Sean P. Downes 04/02/2015

<u>**</u>Signature of Reporting Person

Date

Explanation of Responses:

* 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.