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Latham Anthony Piers Form 4 March 01, 2012							
FORM 4 UNITED					-	PPROVAL	
UNITED		TES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549			N OMB Number:	3235-0287	
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). Statement OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940					Estimated a burden hou response	Estimated average burden hours per response 0.5	
(Print or Type Responses)							
1. Name and Address of Reporting Latham Anthony Piers	Symbol	one Reinsurance Ho	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) (First) (C/O FLAGSTONE REINSU HOLDINGS SA, 65, AVEN LA GARE	(Month/ JRANCE 02/27/	of Earliest Transaction /Day/Year) 2012		X Director Officer (giv below)		6 Owner er (specify	
(Street)	4. If Amendment, Date Original Filed(Month/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
LUXEMBOURG, N4 L-161	1			Form filed by Person	More than One Ro	eporting	
(City) (State)	(Zip) Ta	ble I - Non-Derivative	Securities A	cquired, Disposed o	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	 3. 4. Securit: TransactionAcquired Code Disposed (Instr. 8) (Instr. 3, 4) Code V Amount 	(A) or of (D)	Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Reminder: Report on a separate line	e for each class of sec	curities beneficially own	ned directly o	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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Restricted Share Units	\$ 0 <u>(1)</u>	02/27/2012		А	2,026	02/27/2012 <u>(2)</u>	(3)	Common Shares	2,026

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Reporting Owners

Reporting Owner Name / Address			Relationships					
		Director	10% Owner	Officer	Other			
Latham Anthony Piers C/O FLAGSTONE REINSURANCE HOLDINGS 65, AVENUE DE LA GARE LUXEMBOURG, N4 L-1611	S SA	Х						
Signatures								
/s/ William F. Fawcett, by power of attorney	02/29	/2012						
**Signature of Reporting Person	Da	ite						

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).

Each Restricted Share Unit ("RSU") represents the right to receive, without payment to the Company, one newly issued, fully paid and non-assessable common share of the Company, subject to the terms and conditions of the RSU Plan and grant certificate evidencing each

- (1) In the discretion of the Company, subject to the terms and conditions of the KSO Fian and grant certificate evidencing each grant. In the discretion of the Compensation Committee, upon exercise, the RSU grant may alternatively be paid in cash, or partly in cash and partly in common shares.
- (2) The RSUs vest 100% on the date of the grant.
- (3) The RSUs have no expiry date.

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.