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ate) (	(Zip)	Tabl	le I - Non-Der	ivative Se	curitie	es Acqui	ired, Disposed of	, or Beneficiall	ly Owned	
any		n Date, if	Date, if Transaction (A) or Dia Code (Instr. 3, 4			Disposed of (D) Securities (4, 4 and 5) Beneficial Owned at of Issuer's Fiscal Yea		Ownership Form: Direct	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Amount	(A) or (D)	Price	(Instr. 3 and 4)			
/2004	Â		J <u>(1)</u>	514	А	\$ 12.94	514	D	Â	
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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)

## Edgar Filing: HOLLY JOHN - Form 5

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. O B O E I S G F I S (I
				(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
HOLLY JOHN C/O ANIMAS CORPORATION 200 LAWRENCE DRIVE WEST CHESTER, PA 19380	Â	Â	VP Operations	Â			
Signatures							
Richard A. Baron, Attorney In Fac Holly	n	02/14/2005					
**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).
- (1) These shares were acquired pursuant to the Issuer's 2004 Employee Stock Purchase Plan under Section 423 of the Internal Revenue Code of 1986, as amended, in a transaction exempt under Rule 16b-3(c) of the Securities Exchange Act of 1934, as amended.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.