Edgar Filing: ENDO PHARMACEUTICALS HOLDINGS INC - Form 4

ENDO PHARMACEUTICALS HOLDINGS INC

Form 4

August 09, 2006

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or

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

See Instruction 1(b).

obligations

may continue.

Form 5

(Print or Type Responses)

(Last)

1. Name and Address of Reporting Person *

(First)

AMMON CAROL A

2. Issuer Name and Ticker or Trading

Symbol

ENDO PHARMACEUTICALS

HOLDINGS INC [ENDP]

3. Date of Earliest Transaction (Month/Day/Year)

03/27/2006

(Street) 4. If Amendment, Date Original

(Middle)

Filed(Month/Day/Year)

OMB

Number:

Expires:

response...

Estimated average

burden hours per

OMB APPROVAL

3235-0287

January 31,

2005

0.5

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

_X__ Director 10% Owner Other (specify Officer (give title

below)

6. Individual or Joint/Group Filing(Check

Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting

Person

CHADDS FORD, PA 19317

100 ENDO BOULEVARD

(City)	(State)	(Zip) Tab	ole I - Non-	-Derivative Sec	curitie	es Acquir	ed, Disposed of,	or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. 4. Securities Acquired (A) Transaction Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or			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)	
_			Code V	Amount	(D)	Price	(Instr. 3 and 4)		
Common Stock, par value \$.01 per share	03/27/2006		M	584,396	A	\$ 2.42	584,396	D	
Common Stock, par value \$.01 per share	03/27/2006		M	662,566	A	\$ 2.42	1,246,962	D	
Common Stock, par value \$.01 per share	03/27/2006		S	1,246,962	D	\$ 31.65	0	D	

Edgar Filing: ENDO PHARMACEUTICALS HOLDINGS INC - Form 4

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.

SEC 1474 (9-02)

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. Transaction Code (Instr. 8)	5. Number of orDerivative 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 of Number of Shares
Class A Stock Options	\$ 2.42	03/27/2006		M		584,396	10/12/2005	08/26/2007	Common Stock	584,390
Class B Stock Options	\$ 2.42	03/27/2006		M		662,566	03/21/2006	08/26/2007	Common Stock	662,560

Reporting Owners

Reporting Owner Name / Address	Relationships						
1	Director	10% Owner	Officer	Other			
AMMON CAROL A							
100 ENDO BOULEVARD	X						
CHADDS FORD, PA 19317							

Signatures

/s/ Carol A.
Ammon 08/09/2006

**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.

Reporting Owners 2