#### FROST PHILLIP MD ET AL

Form 4 April 01, 2009

# FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB** Number:

3235-0287

Expires:

5. Relationship of Reporting Person(s) to

Issuer

January 31, 2005

0.5

Estimated average

burden hours per response...

**OMB APPROVAL** 

if no longer subject to Section 16. Form 4 or

Check this box

Form 5 obligations may continue. See Instruction

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

2. Issuer Name and Ticker or Trading

LADENBURG THAI MANN

Symbol

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \*

FROST PHILLIP MD ET AL

|                          |                                      |   |                                | FINANCIAL SERVICES INC [LTS]                         |                           |   |                            | [LTS]   | (Check all applicable)  |  |                                   |
|--------------------------|--------------------------------------|---|--------------------------------|--|---------------------------|---|----------------------------|---|---|--|-----------------------------------|
|                          | (Last) 4400 BISC                     | (First) (                               | Middle) VARD,                  | (Month/Day/Year)                                     |                           |   |                            | X Director<br>Officer (gi<br>below)                     |   | 10% Owner<br>Other (specify                    |                                   |
| (Street) MIAMI, FL 33137 |                                      |   |                                | 4. If Amendment, Date Original Filed(Month/Day/Year) |                           |   |                            |   | 6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person _X_ Form filed by More than One Reporting |  |                                   |
|                          | (City)                               | (State)                                 | (Zip)                          | Tob  | la I. Nan I               | ransaction X DirectorOfficer (g below)  ate Original  6. Individual orForm filed bX_ Form filed b _Person  Derivative Securities Acquired, Disposed  4. Securities Acquired  5. Amount of | d of on Donoff dally Owned |   |   |  |                                   |
|                          | 1.Title of<br>Security<br>(Instr. 3) | 2. Transaction Date<br>(Month/Day/Year) | e 2A. Deem<br>Execution<br>any | ned<br>Date, if                                      | 3.<br>Transaction<br>Code | 4. Securities Acquired ansaction(A) or Disposed of (D)  |                            | 5. Amount of 6. Securities Ownership Beneficially Form: |   | 7. Nature of Indirect Beneficial               |                                   |
|                          |                                      |   | (Month/D                       | ay/Year)   | (Instr. 8)  Code V        | Amount  | or                         | Price   | Following<br>Reported<br>Transaction(s)   | Direct (D)<br>or Indirect<br>(I)<br>(Instr. 4) | Ownership<br>(Instr. 4)           |
|                          | Common<br>Stock                      | 03/31/2009                              |                                |  | P                         |   |                            |   | 8,724,223   | I  | Frost Gamma Investments Trust (1) |
|                          | Common<br>Stock                      | 03/31/2009                              |                                |  | P                         | 2,500   | A                          | \$<br>0.51  | 8,726,723   | I  | Frost Gamma Investments Trust (1) |
|                          | Common<br>Stock                      | 03/31/2009                              |                                |  | P                         | 102   | A                          | \$<br>0.52  | 8,726,825   | I  | Frost<br>Gamma<br>Investments     |

Trust (1)

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| Common<br>Stock | 03/31/2009 | P | 25,338 | A | \$<br>0.53 | 8,752,163  | I | Gamma Investments Trust (1)              |
|-----------------|------------|---|--------|---|------------|------------|---|--|
| Common<br>Stock | 03/31/2009 | P | 20,136 | A | \$<br>0.54 | 8,772,299  | I | Frost Gamma Investments Trust (1)        |
| Common<br>Stock |            |   |        |   |            | 43,013,431 | I | Frost Nevada<br>Investments<br>Trust (2) |

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

Persons who respond to the collection of SEC 1474 information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

(9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transactic<br>Code<br>(Instr. 8) | 5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) |                     | ate                | 7. Title<br>Amou<br>Under<br>Securi<br>(Instr. | nt of<br>lying                         | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secur<br>Bene<br>Owne<br>Follo<br>Repo<br>Trans<br>(Instr |
|---|---|---|---|--|--|---------------------|--------------------|--|--|---|---|
|   |   |   |   | Code V                                 | (Instr. 3, 4, and 5)  (A) (D)  | Date<br>Exercisable | Expiration<br>Date | Title  | Amount<br>or<br>Number<br>of<br>Shares |   |   |

# **Reporting Owners**

| Reporting Owner Name / Address  | Relationships |           |         |       |  |  |  |
|---|---------------|-----------|---------|-------|--|--|--|
| <b>Fg</b>   | Director      | 10% Owner | Officer | Other |  |  |  |
| FROST PHILLIP MD ET AL<br>4400 BISCAYNE BOULEVARD<br>MIAMI, FL 33137                      | X             | X         |         |       |  |  |  |
| Frost Gamma Investments Trust<br>4400 BISCAYNE BOULEVARD<br>15TH FLOOR<br>MIAMI, FL 33137 |               | X         |         |       |  |  |  |

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## **Signatures**

/s/ Phillip Frost, M.D. 03/31/2009

\*\*Signature of Reporting Person Date

FROST GAMMA INVESTMENTS TRUST by: /s/ Phillip Frost, MD,
Trustee 03/31/2009

\*\*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).
- These securities are held by Frost Gamma Investments Trust, of which the Reporting Person is the trustee and Frost Gamma, L.P. is the sole and exclusive beneficiary. The Reporting Person is one of two limited partners of Frost Gamma, L.P. The general partner of Frost Gamma, L.P. is Frost Gamma, Inc., and the sole shareholder of Frost Gamma, Inc. is Frost-Nevada Corporation. The Reporting Person is also the sole shareholder of Frost-Nevada Corporation.
- These securities are held by Frost Nevada Investments Trust, of which the Reporting Person is the trustee and Frost-Nevada, L.P. is the sole and exclusive beneficiary. The Reporting Person is one of five limited partners of Frost-Nevada, L.P. and the sole shareholder of Frost-Nevada Corporation, the sole general partner of Frost-Nevada, L.P.

#### **Remarks:**

#### Exhibit 99--Joint Filer Information

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.

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