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MEADOWBROOK INSURANCE GROUP INC

Form 4 July 09, 2015

FORM 4

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

OMB APPROVAL

OMB
Number: 3235-0287

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005

Form 4 or Form 5 obligations may continue.

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

burden hours per response... 0.5

Estimated average

See Instruction 1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * CUBBIN ROBERT S			2. Issue Symbol	er Name ar	nd Ticker or Trading	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
				OWBRO P INC [N	OOK INSURANCE MIG]					
(Last)	(First)	(Middle)		of Earliest ' Day/Year)	Transaction	DirectorX Officer (give below)	ve title 0t			
26255 AMERICAN DRIVE			02/20/2	2015		President & CEO				
(Street)			4. If Am	endment, I	Date Original	6. Individual or Joint/Group Filing(Check				
		Filed(Mo	onth/Day/Ye	ar)	Applicable Line) _X_ Form filed by One Reporting Person					
SOUTHFI	ELD, MI 48034					Form filed by Person				
(City)	(State)	(Zip)	Tab	le I - Non	-Derivative Securities Acc	quired, Disposed o	of, or Benefici	ally Owned		
1.Title of Security	2. Transaction Date (Month/Day/Year)				4. Securities Acquired ior(A) or Disposed of (D)	5. Amount of Securities	6. Ownership	7. Nature of Indirect		

	Table 1 - Non-Delivative Securities Acquired, Disposed of, of Deficiently Owned									
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactio Code (Instr. 8)	4. Securitie or(A) or Disp (Instr. 3, 4	osed o	of (D)	5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code V	Amount	or (Instr. 3 and 4)		(I) (Instr. 4)			
Common Stock	02/20/2015		A	98,802 (2)	A	\$ 8.65	649,179	D		
Common Stock	07/07/2015		J <u>(1)</u>	1,525	D	\$ 8.65	0	I	Shares owned by dependent child, Doug	
Common Stock	07/07/2015		J <u>(1)</u>	649,179	D	\$ 8.65	0	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 (9-02)

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title a	and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	orNumber	Expiration D	ate	Amount	of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underly	ing	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securitie	es	(Instr. 5)	Bene
	Derivative				Securities			(Instr. 3	and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									mount		
						Date	Expiration	01 Title N			
						Exercisable	Date	Title Number			
				C 1 W	(A) (D)			of			
				Code V	(A) (D)			S	hares		

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

CUBBIN ROBERT S 26255 AMERICAN DRIVE SOUTHFIELD, MI 48034

President & CEO

Signatures

Michael Costello Attorney-in-fact 07/09/2015

**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) On July 7, 2015 Fosun International Limited acquired Meadowbrook Insurance Group, Inc. for \$8.65 per share.
- (2) Shares were awarded under the 2015 LTIP

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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