Flagstone Reinsurance Holdings Ltd Form 3 March 29, 2007 FORM 3 UNITED STATE

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

### INITIAL STATEMENT OF 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 OMB APPROVAL

OMB 3235-0104 Number: January 31, 2005 Estimated average burden hours per response... 0.5

(Print or Type Responses)

1. Title (Instr. 4

1. Name and Address of Reporting Person <u>*</u> Roston Marc	<ol> <li>Date of Event Requiring Statement (Month/Day/Year)</li> </ol>	3. Issuer Name and Ticker or Trading Symbol Flagstone Reinsurance Holdings Ltd [FSR]			
(Last) (First) (Middle)	03/29/2007 L	4. Relationship of Reporting Person(s) to Issuer		5. If Amendment, Date Original Filed(Month/Day/Year)	
MANAGEMENT LLC, 1301 FIFTH AVENUE, 40TH FLOO (Street)	R	(Check al X_ Director Officer (give title below)	Il applicable) <u>10% Or</u> <u>Other</u> (specify below	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting	
SEATTLE, WA 98101 (City) (State) (Zip)	Table I - 1	Non-Derivativ	ve Securitie	Person Form filed by More than One Reporting Person s Beneficially Owned	
1.Title of Security (Instr. 4)	2. Amount o Beneficially (Instr. 4)	of Securities a Owned G I I C C C	3. Ownership	4. Nature of Indirect Beneficial Ownership (Instr. 5)	
Reminder: Report on a separate line for owned directly or indirectly.	each class of securities benefic	cially SEC	C 1473 (7-02)		
information co	espond to the collection of ntained in this form are no pond unless the form disp	t			

currently valid OMB control number.

#### Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

e of Derivative Security 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)			5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
	Date Exercisable	Expiration Date	Title	Amount or Number of	Derivative Security	2		

Shares or Indirect (I) (Instr. 5)

# **Reporting Owners**

<b>Reporting Owner Name / Address</b>		Relationships			
		Director	10% Owner	Officer	Other
Roston Marc C/O SILVER CREEK CAPITAL MANAGEMENT LLC 1301 FIFTH AVENUE, 40TH FLOOR SEATTLE, WA 98101		ÂX	Â	Â	Â
Signatures					
Mara Doctor	03/20/2007				

Marc Roston	03/29/2007		
<u>**</u> Signature of Reporting Person	Date		

# **Explanation of Responses:**

### No securities are beneficially owned

- \* If the form is filed by more than one reporting person, *see* Instruction 5(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).

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### **Remarks:**

### Applicant is a director of the Issuer

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.