**ASSURANT INC** Form 4 March 09, 2005

# FORM 4

#### **OMB APPROVAL**

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

**OMB** 3235-0287 Number:

Check this box if no longer subject to Section 16.

January 31, Expires: 2005

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Estimated average burden hours per response... 0.5

Form 4 or 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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading FEAGIN ALAN W Issuer Symbol ASSURANT INC [AIZ]

(Check all applicable) (Last) (First) (Middle) 3. Date of Earliest Transaction

ONE CHASE MANHATTAN PLAZA, 41ST FLOOR

(Month/Day/Year) Director 10% Owner X\_ Officer (give title \_X\_ Other (specify 03/09/2005 below) below) Exec. VP; Pres. and CEO, / Assurant

4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Applicable Line)

(Street) Filed(Month/Day/Year)

(Zip)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

PreNeed

Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

NEW YORK, NY 10005

(State)

(City)

		Table 1 - Non-Derivative Securities Acquired, Disposed of, or Deficiencially Owned								
1.Title of Security	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if	3. 4. Securities Acquired (A) Transaction Disposed of (D)			5. Amount of Securities	6. Ownership	7. Nature of Indirect		
(Instr. 3)	(Manual Eug)	any	Code (Instr. 3, 4 and 5)			Beneficially	Form:	Beneficial		
()		(Month/Day/Year)	(Instr. 8)	(======================================	/		Owned	Direct (D)	Ownership	
		•	`				Following	or Indirect	(Instr. 4)	
					(4)		Reported	(I)		
					(A)		Transaction(s)	(Instr. 4)		
			Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
<b>C</b>			Code v	Amount	(D)	Price				
Common Stock	03/09/2005		M	11,327.73	A	\$ 22	14,386.73	D		
Common Stock	03/09/2005		D	11,327.73	D	\$ 34.5	3,059	D		

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 (9-02)required to respond unless the form displays a currently valid OMB control number.

#### Edgar Filing: ASSURANT INC - Form 4

# 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 onDerivative Securities Acquired (A) of Disposed of (D (Instr. 3, 4, and	Expiration Da (Month/Day/ <sup>*</sup> or	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Am Underlying Sec (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	A N S	
Stock Appreciation Right	\$ 22	03/09/2005		M	11,327.	73 02/04/2005	12/31/2008	Common Stock	1	

# **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

FEAGIN ALAN W ONE CHASE MANHATTAN PLAZA 41ST FLOOR NEW YORK, NY 10005

Exec. VP; Pres. and CEO, Assurant PreNeed

# **Signatures**

Lisa Richter
Attorney-in-Fact
03/09/2005

\*\*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).

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