Edgar Filing: UNIVERSAL INSURANCE HOLDINGS, INC. - Form 4

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UNIVERSA Form 4 July 18, 200	L INSURANCE	HOLDIN	IGS, INC	2.									
FORM										OMB AF	PROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									OMB Number:	3235-0287			
Check th if no long	ger						Expires:	January 31, 2005					
STATEMENT OF CHANGES IN BENEFICIAL OWNERS Section 16. Form 4 or							ERSHIP OF	Estimated a burden hour response	average Irs per				
Form 5 obligatio	$^{\rm ns}$ Section 17(•	Act of 1934, 1935 or Section				
may con <i>See</i> Instr 1(b).	unue.			vestment		-	•						
(Print or Type]	Responses)												
DOWNES SEAN P Symbol UNIVE				Issuer Name and Ticker or Trading nbol IIVERSAL INSURANCE					5. Relationship of Reporting Person(s) to Issuer				
				NGS, IN			L'		(Check all applicable)				
(Month/				$\frac{-X}{-X}$					below)	Officer (give title Other (specify			
BOULEVA	RD, SUITE 100												
(Street) 4. If A				. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check				
FORT LAU	UDERDALE, FL 3	33309	Filed(Mor	nth/Day/Yea	ur)				Applicable Line) _X_ Form filed by O Form filed by M Person				
(City)	(State)	(Zip)	Tabl	le I - Non-l	Der	ivative So	ecuriti	es Acqu	iired, Disposed of,	or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any		3. Transactic Code (Instr. 8)	on(A	. Securitie A) or Disp instr. 3, 4	osed c	of (D)	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	07/16/2007			S	5	00,000	D	\$ 5.84	2,972,434	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 required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title Deriva Securi (Instr.	tive C ty c 3) H I	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address		Relationships							
		Director	10% Owner	Officer	Other				
DOWNES SEAN P 1110 WEST COMM SUITE 100 FORT LAUDERDA	Х		Senior V.P. and COO						
Signatures									
/s/ Sean P.									
Downes	07/18/2007								
**Signature of	Date								

Reporting Person 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.