Edgar Filing: MEADOWBROOK INSURANCE GROUP INC - Form 4

MEADOWB Form 4 May 16, 2006	ROOK INSURAL	NCE GROU	UP INC								
FORM	1									PROVAL	
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287			
Check this box if no longer							Expires:	January 31, 2005			
•	subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF						NERSHIP OF	Estimated average			
	Section 16. SECURITIES						burden hou				
Form 5	Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,								response	0.5	
obligations may continue.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 R	Responses)										
MARK FLORINE Symbol			mbol	uer Name and Ticker or Trading I DOWBROOK INSURANCE				5. Relationship of Reporting Person(s) to Issuer			
				UP INC [MIG]				(Check all applicable)			
(Month/Da			Ionth/Da	below)				e title 10% Owner Other (specify below)			
P.O. BOX 9072 05/16/20											
				endment, Date Original nth/Day/Year)				6. Individual or Joint/Group Filing(CheckApplicable Line)_X_ Form filed by One Reporting Person			
FARMINGT HILLS, MI 4								Form filed by M Person	Iore than One Re	porting	
(City)	(State) (Zip)	Table	I - Non-De	erivative S	Securi	ties Acc	quired, Disposed of	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date any (Month/Day/Year)		Date, if	Code (D)			SecuritiesIBeneficially()OwnedIFollowing()Reported()	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)				
				Code V	Amount	or (D)	Price	Transaction(s) (Instr. 3 and 4)			
Common Stock	05/16/2006			Р	1,000	А	\$ 8.24	10,000	Ι	Held in trust	

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 of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Securi (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			
MARK FLORINE P.O. BOX 9072 FARMINGTON HILLS, MI 48333-9072	Х						
Signatures							
/s/Michael G. Costello Attorney-in-fact	05/16/	2006					
**Signature of Reporting Person	Date	•					
Evelopetion of Deeper							

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.