### **3** 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

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> Corrigan Robert S		2. Date of Event Requiring Statement (Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol AcuNetx, Inc. [ANTX]				
(Last)	(First)	(Middle)	12/23/2005		4. Relationship of Reporting Person(s) to Issuer		5. If Amendment, Date Original Filed(Month/Day/Year)
C/O ACUNETX, INC., 1000 S. MCCASLIN BLVD #300		(Check all applicable)			The ((itelia) Day Teal)		
	(Street)			OfficerOther (give title below) (specify below)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting
SUPERIOR,	CO 80	027					Person Form filed by More than One Reporting Person
(City)	(State)	(Zip)	Table I -	Non-Derivat	ive Securiti	es Be	neficially Owned
1.Title of Secur (Instr. 4)	ity		2. Amount Beneficially (Instr. 4)	of Securities 7 Owned	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nat Owne (Instr.	I
Common Sto	ock, \$.001 p	oar value	161,033		D	Â	
Reminder: Repo owned directly o	-	te line for ea	ch class of securities benefi	cially S	EC 1473 (7-02	)	
		-	oond to the collection o ined in this form are no				

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

required to respond unless the form displays a

currently valid OMB control number.

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4) Title	4. Conversion or Exercise Price of Derivative	5. Ownership Form of Derivative Security:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
		The	Security	Direct (D)	

OMB APPROVAL

Estimated average burden hours per

3235-0104

January 31,

2005

0.5

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Number:

Expires:

response...

#### Edgar Filing: Corrigan Robert S - Form 3

Date	Expiration	Amount or	or Indirect
Exercisable	Date	Number of	(I)
		Shares	(Instr. 5)

# **Reporting Owners**

Reporting Owner Name / Address		Relationships					
		Director	10% Owner	Officer	Other		
Corrigan Robert S C/O ACUNETX, INC. 1000 S. MCCASLIN BL SUPERIOR, CO 8002		ÂX	Â	Â	Â		
Signatures							
/s/ Robert S. Corrigan	01/03/20	)06					
<u>**</u> Signature of Reporting Person	Date						

## **Explanation of Responses:**

\* 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).

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.