Edgar Filing: QUILLINAN ROBERT J - Form 4

| QUILLINAN | ROBERT J | | | | | | | | | | | | |
|---|--|------------------|---|--|-----|---|---|---------------------------------------|--|--|---|--|--|
| Form 4 | | | | | | | | | | | | | |
| May 12, 2011 | | | | | | | | | | OMB A | PPROVAL | | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | | | 3235-0287 | | | | |
| if no longe subject to Section 16 Form 4 or Form 5 obligations may contin | Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction See In | | | | | | Expires: Estimated a burden hou response | irs per | | | | | |
| (Print or Type Re | esponses) | | | | | | | | | | | | |
| QUILLINAN ROBERT J Symbol WRIGH | | | Symbol | er Name and Ticker or Trading HT MEDICAL GROUP INC I] | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | |
| | | | e of Earliest Transaction n/Day/Year) /2011 | | | | | X Director Officer (give below) | Officer (give title Other (specify | | | | |
| | | | | Amendment, Date Original Month/Day/Year) | | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | | |
| KIAWAH IS | LAND, SC 29 | 455 | | | | | | | | More than One Ro | | | |
| (City) | (State) | (Zip) | Table | e I - Non | -De | rivative S | Securi | ties Ac | quired, Disposed o | of, or Beneficial | lly Owned | | |
| 1.Title of Security (Instr. 3) | 2. Transaction D (Month/Day/Yea | ar) Executionary | emed on Date, if /Day/Year) | Code (Instr. | 8) | 4. Securi Acquired Disposed (Instr. 3, Amount | l (A) c l of (D |)) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| Common Stock | 05/11/2011 | | | A | | 5,387 | A | \$ 0 | 18,202 | 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)

Edgar Filing: QUILLINAN ROBERT J - Form 4

| D Se | Title of erivative ecurity nstr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | Code Securities | | Expiration D (Month/Day | Date | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | | 33 1 2 () |
|--------------|--|---|---|---|-----------------|--------|----------------------------|--------------------|---|-------------------------------------|--------------------|
| | | | | | Code V | (A) (D | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | |
| С S (1 | Outside Director tock Option right to uy) | \$ 15.5 | 05/11/2011 | | A | 10,000 | <u>(1)</u> | 05/11/2021 | Common Stock | 10,000 | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | | |
|--|---------------|-----------|---------|-------|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | |
| QUILLINAN ROBERT J 310 PALM WARBLER ROAD KIAWAH ISLAND, SC 29455 | Х | | | | | | | |
| Signatures | | | | | | | | |
| /s/ J. Daniel Huffines, per Power of Attorney for Robert J. | | | | | | | | |

Quillinan

**Signature of 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).

Delettenshing

(1) The stock option vests and becomes exercisable in four equal annual installments beginning on 5/11/2012.

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.

Date

05/12/2011

8 E S