#### **ENSTAR GROUP INC**

Form 4 April 05, 2005

## FORM 4

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

Check this box if no longer

subject to Section 16. Form 4 or

Form 5 obligations may continue. See Instruction STATEMENT OF CHANGES IN 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(b).

(Last)

1. Name and Address of Reporting Person \* DAVIS T WAYNE

(First) (Middle)

1910 SAN MARCOS BLVD.

(Street)

04/01/2005

5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading Symbol

ENSTAR GROUP INC [ESGR]

3. Date of Earliest Transaction

(Month/Day/Year)

4. If Amendment, Date Original

Filed(Month/Day/Year)

Issuer

**OMB APPROVAL** 

3235-0287

January 31,

2005

0.5

**OMB** 

Number:

Expires:

response...

Estimated average

burden hours per

(Check all applicable)

X\_ Director 10% Owner Officer (give title Other (specify

below) 6. Individual or Joint/Group Filing(Check

Applicable Line) \_X\_ Form filed by One Reporting Person

Form filed by More than One Reporting Person

5. Amount of

Securities

Beneficially

(City) (State) (Zip)

JACKSONVILLE, FL 32207

1.Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year) Execution Date, if (Instr. 3)

(Month/Day/Year)

4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8)

(Instr. 3, 4 and 5)

Owned Following Reported (A) Transaction(s) or (Instr. 3 and 4)

Code V Amount (D) Price

number.

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

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial Ownership

(Instr. 4) (Instr. 4)

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

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

1. Title of Derivative Conversion Security or Exercise (Instr. 3) Price of

3. Transaction Date 3A. Deemed (Month/Day/Year)

Execution Date, if (Month/Day/Year) 4. Transactionof Code Derivative (Instr. 8) Securities

5. Number 6. Date Exercisable and **Expiration Date** (Month/Day/Year)

7. Title and Amount of 8. Price of **Underlying Securities** (Instr. 3 and 4)

Derivativ Security (Instr. 5)

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	Derivative Security				Acquin (A) or Dispos of (D) (Instr. and 5)	r osed ) . 3, 4,					
			Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Unit Stock (1)	<u>(1)</u>	04/01/2005	A		106		<u>(1)</u>	<u>(1)</u>	Common Stock	106	\$ 59.05
Unit Stock (1)	<u>(1)</u>	04/01/2005	A		8		<u>(1)</u>	<u>(1)</u>	Common Stock	8	\$ 59.05
Unit Stock (1)	<u>(1)</u>	04/04/2005	A		43		<u>(1)</u>	<u>(1)</u>	Common Stock	43	\$ 58.14
Unit Stock (1)	(1)	04/04/2005	A		27		<u>(1)</u>	<u>(1)</u>	Common Stock	27	\$ 58.14

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
1 6	Director	10% Owner	Officer	Other				
DAVIS T WAYNE 1910 SAN MARCOS BLVD. JACKSONVILLE, FL 32207	X							

# **Signatures**

Cheryl D Davis by Power of Attorney

04/05/2005

\*\*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).
- (1) These stock units were accrued under The Enstar Group, Inc. Deferred Compensation and Stock Plan for non-employee Directors and are to be settled in a lump sum distribution within 30 days after termination of the Reporting Person's services on the Board of Directors.

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