Edgar Filing: VON ARX DOLPH W - Form 4

VON ARX DO	OLPH W											
Form 4												
May 25, 2010												
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL				
CUNIVI 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMMISSION	OMB Number:	3235-0287		
Check this box									Expires:	January 31,		
if no longer subject to STATEMENT OF CHANC				GES IN BENEFICIAL OWN				ERSHIP OF		ated average		
Section 16.				SECURITIES					verage rs per			
Form 4 or									response 0.5			
Form 5 obligations	-						-	Act of 1934,				
may contin				•	•			935 or Section	l			
See Instruct 1(b).		30(h)	of the Inv	estment C	lompany	Act of	of 1940					
(Print or Type Re	sponses)											
VON ARX DOLPH W Symb								5. Relationship of Reporting Person(s) to Issuer				
			-	C [CREE	1							
(Last)	(First) (N							(Check all applicable)				
(Month/Da 3663 RUM ROW 05/21/20				Earliest Transaction				X Director 10% Owner				
			05/21/20	-				Officer (give title Other (specify				
								below) below)				
			-				6. Individual or Joint/Group Filing(Check					
							Applicable Line) _X_ Form filed by One Reporting Person					
NAPLES, FL	34102						_	Form filed by Mo				
NAI LES, I'L	54102						Р	Person				
(City)	(State)	(Zip)	Table	I - Non-Dei	rivative Se	curiti	es Acqui	red, Disposed of,	or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, i any			3.4. Securities AcquiredTransaction(A) or Disposed of (D)Code(Instr. 3, 4 and 5)			l of (D)	5. Amount of Securities Beneficially	Ownership India	7. Nature of Indirect Beneficial		
	(Month/Day/Y							Owned	Direct (D)	Ownership		
								Following Reported	or Indirect (I)	(Instr. 4)		
						(A)		Transaction(s)	(Instr. 4)			
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)				
COMMON STOCK	05/21/2010			M	16,000	A A	\$ 19.88	500,435	D (1)			

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)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. 5. Number of TransactiorDerivative Code Securities (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title ar Underlyir (Instr. 3 a		
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title
NONQUALIFIED STOCK OPTION (RIGHT TO BUY)	\$ 19.88	05/21/2010		М			16,000	12/31/2003 <u>(2)</u>	10/13/2010	COMM STOC

Reporting Owners

Reporting Owner Name / Addro	ess	Relationships							
	Director	10% Owner	Officer	Other					
VON ARX DOLPH W 3663 RUM ROW NAPLES, FL 34102	Х								
Signatures									
Dolph W. von Arx	05/25/2010								
**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).

Of the 500,435 shares reported, (1) 63,500 shares are held directly; (2) 406,935 shares are held indirectly in a revocable living trust for the benefit of Mr. von Arx; (3) 15,000 shares are held indirectly in a revocable living trust for the benefit of Mr. von Arx's spouse; and (4) 15,000 shares are held indirectly in a family trust. Mr. von Arx disclaims beneficial ownership of the 15,000 shares held by the family trust.

(2) Option vested as to 4,000 shares on each of December 31, 2003, March 31, 2004, June 30, 2004 and September 30, 2004.

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.