### UNIVERSAL INSURANCE HOLDINGS, INC.

Form 5

February 05, 2015

#### **OMB APPROVAL** FORM 5

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

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

Form 4 Transactions Reported

Reported

1(b).

1. Name and Address of Reporting Person \* PALMIERI RALPH J.

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to

Issuer

UNIVERSAL INSURANCE HOLDINGS, INC. [UVE]

(Check all applicable)

**OMB** 

Number:

Expires:

response...

Estimated average

burden hours per

3235-0362

January 31,

2005

1.0

(Last) (First) 3. Statement for Issuer's Fiscal Year Ended

(Month/Day/Year)

12/31/2014

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

below) below)

1110 WEST COMMERCIAL **BOULEVARD** 

> (Street) 4. If Amendment, Date Original

(Middle)

Filed(Month/Day/Year)

6. Individual or Joint/Group Reporting

(check applicable line)

**FORT** LAUDERDALE, FLÂ 33309

\_X\_ Form Filed by One Reporting Person Form Filed by More than One Reporting

(City)

1. Title of

Security

(Instr. 3)

(State)

(Month/Day/Year)

(Zip)

Execution Date, if

(Month/Day/Year)

2. Transaction Date 2A. Deemed

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

Code

4. Securities Transaction Acquired (A) or

5. Amount of Securities

Beneficially

Owned at end

6. Ownership Form: Direct (D) or

7. Nature of Indirect Beneficial Ownership

(Instr. 8)

of Issuer's (A) Fiscal Year Indirect (I) (Instr. 4)

(Instr. 4)

or Amount (D) Price

Disposed of (D)

(Instr. 3, 4 and 5)

(Instr. 3 and 4)

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.

**SEC 2270** (9-02)

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

1. Title of 2. 3. Transaction Date 3A. Deemed 5. Number of 6. Date Exercisable and Derivative Conversion (Month/Day/Year) Execution Date, if Transaction Derivative **Expiration Date** 

7. Title and Amou

Underlying Securi

### Edgar Filing: UNIVERSAL INSURANCE HOLDINGS, INC. - Form 5

| Security (Instr. 3)         | or Exercise<br>Price of<br>Derivative<br>Security |            | any<br>(Month/Day/Year) | Code<br>(Instr. 8) | Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | )                | (Month/Day/Year)       |                 | (Instr. 3 and 4)          |  |
|-----------------------------|---|------------|-------------------------|--------------------|---|------------------|------------------------|-----------------|---------------------------|--|
|                             |   |            |                         |                    | (A) (D  | D) Date Exercisa | ble Expiration<br>Date | Title           | Amo<br>or<br>Nun<br>of Sl |  |
| Stock Option (right to buy) | \$ 20.09  | 12/10/2014 | Â                       | A4                 | 30,000 Â  | À 12/10/2015     | (1) 12/10/2019         | Common<br>Stock | 30,                       |  |

## **Reporting Owners**

| Reporting Owner Name / Address   | Relationships |           |         |       |  |  |
|--|---------------|-----------|---------|-------|--|--|
| . 9  | Director      | 10% Owner | Officer | Other |  |  |
| PALMIERI RALPH J.<br>1110 WEST COMMERCIAL BOULEVARD<br>FORT LAUDERDALE, FL 33309 | ÂΧ            | Â         | Â       | Â     |  |  |

# **Signatures**

/s/ Ralph J. 02/05/2015 Palmieri

\*\*Signature of Date
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).
- (1) The option vests in full on the earlier of (i) the first anniversary of the date of grant, and (ii) the second annual meeting of the Issuer's shareholders following the date of the grant, at which the shareholders elect or reelect any directors to the Issuer's board.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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