

CROTHALL KATHERINE D
Form 5/A
March 08, 2005

FORM 5

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

OMB APPROVAL

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). Form 3 Holdings Reported Form 4 Transactions Reported

ANNUAL 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

1. Name and Address of Reporting Person *
CROTHALL KATHERINE D

(Last) (First) (Middle)

C/O ANIMAS CORPORATION, 200 LAWRENCE DRIVE

(Street)

WEST CHESTER, PA 19380

(City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol
ANIMAS CORP [PUMP]

3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year)
12/31/2004

4. If Amendment, Date Original Filed (Month/Day/Year)
02/14/2005

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

[X] Director [X] 10% Owner
[X] Officer (give title below) Other (specify below)
CEO & President *

6. Individual or Joint/Group Reporting

(check applicable line)

[X] Form Filed by One Reporting Person
Form Filed by More than One Reporting Person

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

Table with 7 columns: 1. Title of Security (Instr. 3), 2. Transaction Date (Month/Day/Year), 2A. Deemed Execution Date, if any (Month/Day/Year), 3. Transaction Code (Instr. 8), 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or (D) Amount Price, 5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4), 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4), 7. Nature of Ownership (Instr. 4)

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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

Table with 8 columns: 1. Title of Derivative, 2. Conversion, 3. Transaction Date (Month/Day/Year), 3A. Deemed Execution Date, if any, 4. Transaction, 5. Number, 6. Date Exercisable and Expiration Date, 7. Title and Amount of Underlying Securities, 8. Price

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Security (Instr. 3)	or Exercise Price of Derivative Security	any (Month/Day/Year)	Code (Instr. 8)	of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	(Month/Day/Year)	(Instr. 3 and 4)		(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option (Right to Buy) ⁽¹⁾											Common Stock ⁽¹⁾	0 ⁽¹⁾

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
CROTHALL KATHERINE D C/O ANIMAS CORPORATION 200 LAWRENCE DRIVE WEST CHESTER, PA 19380	X	X	CEO & President *	

Signatures

Richard A. Baron, Attorney-in-Fact for Katherine D. Crothall
Date: 02/24/2005

⁽¹⁾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) The reporting person's original Form 5 inadvertently reported an option grant to purchase 25,000 shares of common stock on December 31, 2004. This amended Form 5 is being filed to omit the reference to this stock option grant and to delete the "X" in the "Form 4 Transactions Reported" box. No stock options were granted to the reporting person on December 31, 2004.

^

Remarks:

Remarks: ^ ^ * ^ The ^ reporting ^ person's ^ original ^ Form ^ 5 ^ incorrectly ^ included ^ a ^ footnote ^ (denoted ^ by ^ an ^

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.