## Edgar Filing: ASSURANT INC - Form 4

Check this box       STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF       Number:         Section 16.       SECURITIES       Lanuary 31									3235-0287 January 31, 2005 average		
<ul> <li>(Print or Type Responses)</li> <li>1. Name and Address of Reporting Person<sup>*</sup></li> <li>2. Issuer Name and Ticker or Trading</li> <li>5. Relationship of Reporting Person(s) to</li> </ul>											
GREENZANG KATHERINE			Symbol	ANT INC		mau	ng	Issuer			
(Last)	(First) (	Middle)		3. Date of Earliest Transaction (Check					all applicable)		
				th/Day/Year)				Director 10% Owner X Officer (give titleX Other (specify below) below) Senior VP, General Counsel / Secretary			
				nendment, Date Original onth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
NEW YORK, NY 10005 Form filed by More than One Reporting Person											
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)	Execution Execution		3. Transactio Code (Instr. 8)	4. Securi n(A) or D (Instr. 3,	ispose 4 and (A) or	d 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)		
Common Stock	03/08/2008			Code V F	Amount 11	(D) D	Price \$ 61.94	66	I	By Spouse	
Common Stock	03/08/2008			F	109	D	\$ 61.94	5,656.92	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.

## Edgar Filing: ASSURANT INC - Form 4

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
FB	Director 10% Owner Officer			Other				
GREENZANG KATHERINE ONE CHASE MANHATTAN PLAZA 41ST FLOOR NEW YORK, NY 10005			Senior VP, General Counsel	Secretary				
Signatures								

Lisa Richter 03/11/2008 Attorney-in-Fact

\*\*Signature of Reporting Person

## **Explanation of Responses:**

\* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

Date

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

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.