### Edgar Filing: APPLE ROBERT F - Form 3

#### APPLE ROBERT F

Form 3

February 13, 2006

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

**OMB** 

**OMB APPROVAL** 

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**SECURITIES** 

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

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. Name and Address of Reporting

Person \*

À APPLE ROBERT F

(First)

(Middle)

Statement

(Month/Day/Year)

02/09/2006

2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol

ANTARES PHARMA INC [ANTR]

(Last)

707 EAGLEVIEW

4. Relationship of Reporting Person(s) to Issuer

5. If Amendment, Date Original

Filed(Month/Day/Year)

BLVD, Â SUITE 414

(Street)

Director \_X\_\_ Officer

10% Owner Other (give title below) (specify below)

6. Individual or Joint/Group Filing(Check Applicable Line) \_X\_ Form filed by One Reporting

Sr VP and CFO Person

Form filed by More than One

Reporting Person

4. Nature of Indirect Beneficial

EXTON, PAÂ 19341

(City) (State) (Zip)

1. Title of Security (Instr. 4)

2. Amount of Securities Beneficially Owned

(Instr. 4)

Ownership Form:

Table I - Non-Derivative Securities Beneficially Owned

(Check all applicable)

Ownership (Instr. 5)

Direct (D) or Indirect (I) (Instr. 5)

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

SEC 1473 (7-02)

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

1. Title of Derivative Security 2. Date Exercisable and (Instr. 4)

**Expiration Date** (Month/Day/Year)

3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)

4. Conversion or Exercise Price of

5. Ownership Form of Derivative

6. Nature of Indirect Beneficial

Ownership

(Instr. 5)

Date Exercisable Expiration Date

Title Amount or Number of

Shares

Derivative Security

Security: Direct (D)

or Indirect (I)

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|   |            |            |               |         |         | (Instr. 5) |   |
|---|------------|------------|---------------|---------|---------|------------|---|
| Option to purchase<br>Antares Pharma, Inc.<br>common shares | 02/09/2010 | 02/08/2016 | common shares | 250,000 | \$ 1.43 | D          | Â |
| Option to purchase<br>Antares Pharma, Inc.<br>common shares | 02/08/2016 | 02/08/2016 | common shares | 150,000 | \$ 1.43 | D          | Â |

# **Reporting Owners**

| Reporting Owner Name / Address | Relationships |           |                  |       |  |  |
|--------------------------------|---------------|-----------|------------------|-------|--|--|
|                                | Director      | 10% Owner | Officer          | Other |  |  |
| APPLE ROBERT F                 |               |           |                  |       |  |  |
| 707 EAGLEVIEW BLVD             | â             | Â         | Sr VP and CFO    | Â     |  |  |
| SUITE 414                      | A             | А         | A SI VI allu CIO | А     |  |  |
| EXTON, PA 19341                |               |           |                  |       |  |  |

### **Signatures**

Lawrence M.
Christian

\*\*Signature of Reporting Person

Date

# **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, see Instruction 5(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).

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.

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