

ALEXION PHARMACEUTICALS INC

Form 4/A

June 29, 2005

FORM 4**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
1(b).

**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

OMB APPROVAL

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(Print or Type Responses)

1. Name and Address of Reporting Person *
BOESS CARSTEN

2. Issuer Name **and** Ticker or Trading
Symbol
ALEXION PHARMACEUTICALS
INC [ALXN]

5. Relationship of Reporting Person(s) to
Issuer

(Check all applicable)

(Last) (First) (Middle)
C/O ALEXION
PHARMACEUTICALS, 352
KNOTTER DR

3. Date of Earliest Transaction
(Month/Day/Year)
06/27/2005

____ Director ____ 10% Owner
____ Officer (give title ____ Other (specify
below) below)
Former CFO

(Street)
CHESHIRE, CT 06410

4. If Amendment, Date Original
Filed(Month/Day/Year)
06/29/2005

6. Individual or Joint/Group Filing(Check
Applicable Line)
X Form filed by One Reporting Person
____ Form filed by More than One Reporting
Person

(City) (State) (Zip)

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

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)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Ownership Indirect Beneficial Ownership (Instr. 4)
Common Stock, par value \$.0001 ⁽¹⁾	06/27/2005		M	11,250	A \$ 23.3936 ⁽²⁾	11,250	D
Common Stock, par value \$.0001	06/27/2005		S	3,250	D \$ 23.27	8,000 ⁽³⁾	D
Common Stock, par	06/27/2005		S	3,000	D \$ 23.4	5,000 ⁽³⁾	D

value
\$.0001

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.

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(9-02)

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. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Transaction (Instr. 3 and 4)
				Code	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares

Reporting Owners

Reporting Owner Name / Address

Relationships

Director 10% Owner Officer Other

BOESS CARSTEN
C/O ALEXION PHARMACEUTICALS
352 KNOTTER DR
CHESHIRE, CT 06410

Former CFO

Signatures

/s/ Carsten
Boess 06/29/2005

__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) This amended filing is being made to reflect the acquisition of 11,250 shares upon exercise of the options reflected in Table II of the original filing. This transaction line was omitted in the original filing.

(2) Reflects average selling price of securities.

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- (3) This transaction line has been amended solely to reflect the correct amount of securities beneficially owned following the reported transactions.

Remarks:

This amended filing is also being made to check the box stating that the reporting person is no longer subject to Section 16.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure.

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