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ANIKA THERAPEUTICS INC

Form 3

October 04, 2005

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

OMB APPROVAL

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INITIAL STATEMENT OF 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

(Print or Type Responses)

1. Name and Address of Reporting

Person *

Litman Peter

(Last)

STREET

(First)

C/O ANIKA THERAPEUTICS,

(Street)

INC., 160 NEW BOSTON

(Middle)

Statement

(Month/Day/Year)

10/03/2005

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

ANIKA THERAPEUTICS INC [ANIK]

4. Relationship of Reporting Person(s) to Issuer

Filed(Month/Day/Year)

(Check all applicable)

Director

10% Owner

_X__ Officer Other (give title below) (specify below) VP, Business Development 6. Individual or Joint/Group

5. If Amendment, Date Original

Filing(Check Applicable Line) _X_ Form filed by One Reporting

Person

Form filed by More than One

Reporting Person

WOBURN, MAÂ 01801

(City) (State)

1. Title of Security (Instr. 4)

(Zip)

2. Amount of Securities

(Instr. 4)

Beneficially Owned

3. Ownership

Table I - Non-Derivative Securities Beneficially Owned

4. Nature of Indirect Beneficial Ownership

Form: (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 (Instr. 4)

2. Date Exercisable and **Expiration Date** (Month/Day/Year)

3. Title and Amount of Securities Underlying **Derivative Security**

4. 5. Conversion Ownership or Exercise Form of

6. Nature of Indirect Beneficial Ownership

(Instr. 4)

Date **Expiration Title** Exercisable Date

Amount or Number of

Derivative Price of Derivative Security: Security Direct (D)

(Instr. 5)

1

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Shares or Indirect

(I) (Instr. 5)

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Litman Peter

C/O ANIKA THERAPEUTICS, INC. 160 NEW BOSTON STREET WOBURN, MAÂ 01801

Â VP, Business Development Â

Signatures

/s/Peter Litman 10/04/2005

**Signature of Person Date

Reporting Person

Explanation of Responses:

No securities are beneficially owned

- * 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).

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Remarks:

No securities are beneficially owned.

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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