#### **HUGUELET DAVID**

Form 4 June 04, 2012

# FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB APPROVAL OMB** 

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Check this box if no longer subject to Section 16. Form 4 or Form 5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

See Instruction

HUGUELET DAVID			2. Issuer Name and Ticker or Trading Symbol Access Plans Inc [APNC]						Issuer  (Check all applicable)			
(Last) (First) (Middle) 900 36TH AENUE, SUITE 105			3. Date of Earliest Transaction (Month/Day/Year) 05/31/2012						Director 10% Owner X Officer (give title Other (specify below)			
NORMAN,	(Street) OK 73072		4. If Amer Filed(Mont	· ·					6. Individual or Jo Applicable Line) _X_ Form filed by N Form filed by N Person	•	rson	
(City)	(State)	(Zip)	Table	I - Non	-D	erivative S	ecurit	ies Acq	uired, Disposed o	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Executio any		Code (Instr. 8		4. Securiti n(A) or Dis (Instr. 3, 4)	posed	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)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	05/31/2012			D	•	60,920	D D	\$ 3.28 (1)	0	D		

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

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

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1. Title Deriva Securi (Instr.	ty 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. Transactio Code (Instr. 8)	5. Number of or 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)	
					Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount Number Shares
Comi Stock Optic		\$ 1.1	05/31/2012		D		4,500	03/01/2008	03/01/2017	common stock	4,500
Comi Stock Optic	2	\$ 0.93	05/31/2012		D		100,000	08/02/2010	08/02/2020	Common Stock	100,00

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				

HUGUELET DAVID 900 36TH AENUE SUITE 105 NORMAN, OK 73072

PRESIDENT RETAIL PLANS

## **Signatures**

/s/ David
Huguelet

\*\*Signature of Reporting Person

O6/04/2012

### **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) Disposed of pursuant to merger agreement between issuer, Affinity Insurance Services, Inc., Atlas Acquisition Corp. and Mark R. Kidd for \$3.28 per share merger consideration.
- This option, which provided for vestig in three equal annual installments beginning on August 1, 2008, was canceled in the merger in exchange for a cash payment of \$2.26 per share underlying the option, representing the difference between the exercise price of the option and the merger consideration of \$3.28 per share, plus a \$0.08 per share special dividend.
- This option, which provided for vesting in three annual installments beginning on August 2, 2010,was canceled in the merger in exchange (3) for a cash payment of \$2.43 per share underlying the option, representing the difference between the exercise price of the option and the merger consideration of \$3.28 per share, plus a \$0.08 per share special dividend.

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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