BOVIE MEDICAL CORP

Form 4

December 08, 2008

FORM 4

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

OMB Number:

3235-0287

0.5

if no longer subject to

Check this box

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

January 31, Expires: 2005 Estimated average

OMB APPROVAL

Section 16. Form 4 or Form 5

obligations

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

burden hours per response...

may continue. See Instruction

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * CITRONOWICZ MOSHE			2. Issuer Name and Ticker or Trading Symbol BOVIE MEDICAL CORP [bvx]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction	(Chook an approach)			
			(Month/Day/Year)	Director 10% Owner			
2806 MEADOW HILL DR.			12/05/2008	X Officer (give title Other (specify below) Chief Operating Officer			
(Street)			4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check			
			Filed(Month/Day/Year)	Applicable Line) _X_ Form filed by One Reporting Person			
CLEARWATER, FL 34621				Form filed by More than One Reporting Person			

(City)	(State)	(Zip) Tal	ble I - Non-Der	ivative Secu	rities A	Acquire	d, Disposed of, o	r 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) (A) or		of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common stock	12/05/2008		Code V F/K(2)	Amount 11,602	(D) D	Price \$ 6.68	(Instr. 3 and 4) 235,411	D	
Common stock	12/05/2008		X/K(1)(2)	155,000	A	\$ 0.5	390,411	D	
Common stock	12/05/2008		F/K(3)	8,907	D	\$ 6.68	381,504	D	
Common stock	12/05/2008		X/K(1)(3)	85,000	A	\$ 0.7	466,504	D	

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

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SEC 1474 (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)	2 3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	Der Sec Acc Dis	Number of rivative curities quired (A) or sposed of (D) str. 3, 4, and	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount Underlying Securitie (Instr. 3 and 4)	
				Code V	(A)) (D)	Date Exercisable	Expiration Date	Title	Amous Number Shares
Stock option	\$ 0.5	12/05/2008		X/K(1)		155,000	04/26/2001	04/26/2011	Common stock	155,0
Stock option	\$ 0.7	12/05/2008		X/K(1)		85,000	01/21/2003	01/21/2013	Common stock	85,0

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

CITRONOWICZ MOSHE 2806 MEADOW HILL DR. CLEARWATER, FL 34621

Chief Operating Officer

Signatures

s/ Moshe

Citronowicz 12/08/2008

**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) Reporting person exercised in-the-money stock options granted pursuant to the Company's stock option plan.
- (2) 11,602 shares were withheld to cover the cost of a stock swap of 155,000 shares.
- (3) 8,907 shares were withheld to cover the cost of a stock swap of 85,000 shares.

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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