UNIVERSAL INSURANCE HOLDINGS, INC.

Form 4

October 10, 2007

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

(Print or Type Responses)

(Last)

(City)

1. Name and Address of Reporting Person * MEIER NORMAN M

(First)

(Middle)

(Zip)

1110 WEST COMMERCIAL **BOULEVARD, SUITE 100**

(Street)

2. Issuer Name and Ticker or Trading

Symbol

UNIVERSAL INSURANCE HOLDINGS, INC. [UVE]

(Month/Day/Year) 10/08/2007

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

3. Date of Earliest Transaction

5. Relationship of Reporting Person(s) to

Issuer

(Check all applicable)

OMB APPROVAL

Estimated average

burden hours per

3235-0287

January 31,

2005

0.5

OMB

Number:

Expires:

response...

Director 10% Owner _X_ Other (specify Officer (give title below) below) Director and Secretary

6. Individual or Joint/Group Filing(Check

Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting

FORT LAUDERDALE, FL 33309

(State)

(City)	(State) (2	Table	: I - Non-De	erivative S	Securi	ties Acq	juired, Disposed o	f, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactio Code (Instr. 8)	Transaction(A) or Disposed of Code (D)		5. Amount of Securities Beneficially Owned	7. Nature of Indirect Beneficial Ownership		
		((A) or		Following Reported Transaction(s) (Instr. 3 and 4)	Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock	10/09/2007		Code V S	Amount 1,000	(D)	Price \$ 9.78	2,797,545	D	
Common Stock	10/09/2007		S	1,200	D	\$ 9.8	2,796,345	D	
Common Stock	10/09/2007		S	100	D	\$ 9.89	2,796,245	D	
Common Stock	10/09/2007		S	100	D	\$ 9.86	2,796,145	D	
Common Stock	10/09/2007		S	800	D	\$ 9.84	2,795,345	D	

Edgar Filing: UNIVERSAL INSURANCE HOLDINGS, INC. - Form 4

Common Stock	10/09/2007	S	1,100	D	\$ 9.84	2,794,245	D
Common Stock	10/09/2007	S	1,100	D	\$ 9.85	2,793,145	D
Common Stock	10/09/2007	S	1,500	D	\$ 9.58	2,791,645	D
Common Stock	10/09/2007	S	200	D	\$ 9.56	2,791,445	D
Common Stock	10/09/2007	S	300	D	\$ 9.54	2,791,145	D
Common Stock	10/09/2007	S	100	D	\$ 9.66	2,791,045	D
Common Stock	10/09/2007	S	2,200	D	\$ 9.65	2,788,845	D
Common Stock	10/09/2007	S	1,100	D	\$ 9.62	2,787,745	D
Common Stock	10/09/2007	S	1,800	D	\$ 9.6	2,785,945	D
Common Stock	10/09/2007	S	200	D	\$ 9.92	2,811,345	D

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.

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed			7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo
					of (D)						Trans (Instr
					(Instr. 3,						
					4, and 5)						
						Date Exercisable	Expiration Date	Title	Amount or Number of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

MEIER NORMAN M 1110 WEST COMMERCIAL BOULEVARD SUITE 100 FORT LAUDERDALE, FL 33309

Director and Secretary

Signatures

Reporting Person

/s/ Norman M.

Meier 10/09/2007

**Signature of 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).

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.

Reporting Owners 3