

ANIKA THERAPEUTICS INC  
Form 3  
January 08, 2010

**FORM 3** 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 \*  
Â Fidia Farmaceutici S.p.A.  
(Last) (First) (Middle)

2. Date of Event Requiring Statement  
(Month/Day/Year)  
12/30/2009

3. Issuer Name **and** Ticker or Trading Symbol  
ANIKA THERAPEUTICS INC [ANIK]

4. Relationship of Reporting Person(s) to Issuer

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

VIA PONTE DELLA  
FABBRICA 3/A

(Street)

(Check all applicable)

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

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

ABANO TERME  
(PD),Â L6Â CAP 35031

(City) (State) (Zip)

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	1,981,192	D <sup>(1)</sup>	Â
Common Stock	1,981,192	I <sup>(1)</sup>	See Footnote <sup>(1)</sup>

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

SEC 1473 (7-02)

**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.**

**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 (Instr. 4)	4. Conversion or Exercise Price of	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
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Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivative Security	Security: Direct (D) or Indirect (I) (Instr. 5)
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## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Fidia Farmaceutici S.p.A. VIA PONTE DELLA FABBRICA 3/A ABANO TERME (PD), L6 CAP 35031	^	^ X	^	^
P&R S.p.A. VIA MILANO N. 186 GARBAGNATE MILANESE (MI), L6 CAP 20024	^	^ X	^	^
Fiore Holding S.r.l. VIA PRINCIPE AMEDEO N. 3 MILANO (MI), L6 CAP 20121	^	^ X	^	^

## Signatures

/s/ Antonio Germani, as Chief Executive Officer for Fidia Farmaceutici S.p.A. 01/08/2010

\*\*Signature of Reporting Person

Date

## Explanation of Responses:

\* 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).

(1) 1,981,192 shares of Common Stock, \$0.01 par value of the Issuer are beneficially owned directly by Fidia Farmaceutici S.p.A. ("Fidia") and may be deemed to be beneficially owned indirectly by (i) P&R S.p.A. ("P&R"), which controls and directly owns a majority of the outstanding equity of Fidia and (ii) Fiore Holding S.r.l. ("Fiore"), which controls and directly owns a majority of the outstanding equity of P&R. Each of P&R and Fiore disclaims beneficial ownership of such shares, except to the extent of any pecuniary interest therein.

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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