SOLITRON DEVICES INC

Form 4 March 22, 2011

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL

OMB 3235-0287 Number:

Expires:

January 31, 2005

0.5

Estimated average burden hours per

response...

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

obligations

may continue.

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 See Instruction

1(b).

per share

(Print or Type Responses)

1. Name and Address of Reporting Person * Stayduhar John			2. Issuer Name and Ticker or Trading Symbol SOLITRON DEVICES INC [SODI]					5. Relationship of Reporting Person(s) to Issuer (Chaele all applicable)				
(Last) (First) (Middle) 3597 BIRDIE DRIVE			3. Date of Earliest Transaction (Month/Day/Year) 03/04/2011					(Check all applicable) Director X 10% Owner Officer (give title Other (specify below)				
				If Amendment, Date Original iled(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting			
								Person				
(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned												
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)) Execution any	emed 3. 4. Securities Acquired on Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Day/Year) (Instr. 8) (A)			of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)				
				Code	V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common Stock par value \$0.01 per share	03/04/2011			S		10,000	D	\$ 3.15	252,602	D		
Common Stock par value \$0.01 per share	03/09/2011			S		500	D	\$ 3.11	252,102	D		
Common Stock par value \$0.01	03/09/2011			S		5,000	D	\$ 3.11	247,102	D		

Edgar Filing: SOLITRON DEVICES INC - Form 4

Common

Stock par value \$0.01 03/11/2011 S 3,090 D \$ 3.12 244,012 D

per share

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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Title and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Number Expiration Date		Amount of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underlying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative)		Securities	(Instr. 5)	Bene
	Derivative				Securities			(Instr. 3 and 4)	4)	Own
	Security				Acquired	Acquired				Follo
					(A) or					Repo
					Disposed					Trans
					of (D)					(Instr
					(Instr. 3,					
					4, and 5)					
								A		
								Amou	int	
					. (A) (D)	Date	Expiration e Date	Or		
						Exercisable		Title Numb	per	
				C 1 W			of			
				Code V	(A) (D)			Shares	S	

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Stayduhar John

3597 BIRDIE DRIVE X

LAKE WORTH,, FL 33467

Signatures

/s/ John Stayduhar 03/21/2011

**Signature of Date

Reporting Person

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 2