PROASSURANCE CORP

Form 4 March 10, 2005

FORM 4

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

OMB 3235-0287 Number:

response...

Check this box if no longer subject to Section 16.

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

January 31, Expires: 2005 Estimated average burden hours per

0.5

OMB APPROVAL

Form 4 or Form 5 obligations may continue. See Instruction

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

1(b).

(Print or Type Responses)

	Address of Reporting l N HOWARD H	Symbol	er Name and Ticker or Trading SSURANCE CORP [PRA]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
CORPORA	SSURANCE	,	of Earliest Transaction Day/Year) 2005	Director 10% Owner X Officer (give titleX Other (specify below) below) Chief Financial Officer / Secretary & Senior VP			
	(Street)	4. If An Filed(M	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
	HAM, AL 35209-0			Form filed by More than One Reporting Person			
(City)	(State) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned						
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or Code V Amount (D) Price	5. Amount of Securities Form: Direct Indirect Beneficially (D) or Beneficial Owned Indirect (I) Ownership Following (Instr. 4) (Instr. 4) Reported Transaction(s) (Instr. 3 and 4)			
Common Stock	03/09/2005		A 2,065 A \$ 41.15	11,480 D			
Common Stock				914 I IRA			
Common Stock				I Spouse's IRA			
D ! d D		C 1 1 C		in diameter			

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

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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)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Code	5. Number of ionDerivative 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 Underlying Securition (Instr. 3 and 4)	
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amou or Numb of Sha
Employee Stock Option (Right to Buy)	\$ 41.15	03/09/2005	A	25,000	09/10/2005(1)	09/10/2015	Common Stock	25,0
Employee Stock Option (Right to Buy)	\$ 33.28				09/10/2004(2)	09/10/2014	Common Stock	25,0
Employee Stock Option (Right to Buy)	\$ 22				09/04/2003(3)	03/04/2013	Common Stock	25,0
Employee Stock Option (Right to	\$ 16.8				07/15/2002(4)	11/05/2012	Common Stock	50,0

Reporting Owners

Buy)

Reporting Owner Name / Address			Keiationsinps	sinps
	Director	10% Owner	Officer	Other

FRIEDMAN HOWARD H C/O PROASSURANCE CORPORATION 100 BROOKWOOD PLACE BIRMINGHAM, AL 35209-6811

Chief Financial Officer Secretary & Senior VP

Reporting Owners 2

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Signatures

Frank B. O'Neil, Attorney-in-fact for the Reporting 03/10/2005 Person

**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) The options vest in five equal installments commencing on September 10, 2005
- (2) The options vest in five equal installments commencing on September 10, 2004
- (3) The options vest in five equal installments commencing on September 4, 2003
- (4) The options vest in five equal installments commencing on July 15, 2002

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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