Edgar Filing: KIPPHUT W MICHAEL - Form 4

KIPPHUT V	V MICHAEL										
Form 4											
July 24, 200											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB AF	PROVAL	
	SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						OMB Number:	3235-0287			
Check th if no long										January 31 2005	
subject to	IENT O	F CHANGES IN BENEFICIAL OWNERSHIP OF						Estimated average burden hours per			
	Section 16.				SECURITIES						
Form 4 c			~ • •		~					0.5	
Form 5 obligatio	n c *						•	e Act of 1934,			
may cont				•	•	· ·		1935 or Section	1		
See Instr	uction	30(h)	of the In	vestment	Compan	y Act	t of 194	0			
1(b).											
(Print or Type]	Responses)										
1. Name and A	Address of Reporting	Person [*]	2. Issue	r Name and	Ticker or	Tradin	וס	5. Relationship of	Reporting Pers	on(s) to	
KIPPHUT V	W MICHAEL		Symbol				.9	Issuer			
			-	ENTERI	PRISES I	NC					
			[SYKE]					(Check all applicable)			
(Last)	(First) (1	Middle)	3. Date of	f Earliest Tr	ansaction			Director	10%	Owner	
			(Month/E	(Month/Day/Year)				_X_ Officer (give title Other (specify			
400 N. ASH 2800	ILEY DRIVE, SU	JITE	07/17/2	-				below)	below) VP & CFO		
			4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check			
				nth/Day/Year	-			Applicable Line)			
								X Form filed by O			
TAMPA, F	L 33602							Form filed by M Person	ore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	Derivative S	Securi	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction Date	2A. Deen	ned	3.	4. Securit	ies Ac	quired	5. Amount of	6.	7. Nature of	
Security	(Month/Day/Year)	n Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)					Securities	Ownership	Indirect		
(Instr. 3)							Beneficially Owned	Form: Direct Bene	Beneficial Ownership		
		Day/Year) (Instr. 8)					Following	(D) or Indirect (I)	(Instr. 4)		
						()		Reported	(Instr. 4)		
						(A) or		Transaction(s)			
				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common	07/17/2009			S (1)	400	D	\$	20,100	D		
Stock	07/17/2009			3 <u>(-)</u>	400	D	20.25	20,100	D		
Common							\$				
Stock	07/23/2009			S <u>(1)</u>	13,953	D	ф 20.25	6,147	D		
							-00				

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.

Edgar Filing: KIPPHUT W MICHAEL - Form 4

 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)	4. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	Date	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Addre	ess	Relationships							
	Director	10% Owner	Officer	Other					
KIPPHUT W MICHAEL 400 N. ASHLEY DRIVE SUITE 2800 TAMPA, FL 33602			SVP & CFO						
Signatures									
/s/ W. Michael Kipphut	07/24/2009								
**Signature of Reporting	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 sales reported on this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on June 2, 2009.

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.

Person