SEC Form 4	
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## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subj	ect to
Section 16. Form 4 or Form 5 obligations may continue. See	
Instruction 1(b).	

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

OMB APPRO	DVAL				
OMB Number:	3235-0287				
Estimated average burden					
hours per response:	0.5				

				1 10			30(h) of the										•
1. Name and Address of Reporting Person <sup>*</sup> FROST PHILLIP MD ET AL					2. Issuer Name and Ticker or Trading Symbol SafeStitch Medical, Inc. [SFES.OB]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner					
(Last) (First) (Middle) 4400 BISCAYNE BOULEVARD				3. Date of Earliest Transaction (Month/Day/Year) 01/30/2009							Offic below	er (give til w)	tle	Othe belo	er (specify w)		
(Street) MIAMI (City)	FI (St		33137-3 Zip)	3227	- 4. If ,	. If Amendment, Date of Original Filed (Month/Day/Year) 6. Ind Line)					ine) Forn X Forn	Form filed by One Reporting Person					
		Tabl	e I - N	on-Deriv	vative	Secu	urities Ac	quired	d, Di	sposed o	f, or Be	enefici	ally Owne	ed			
1. Title of Security (Instr. 3) Date (Month/Day			Execution (y/Year) if any		xecution Date, any		Transaction Disposed C Code (Instr. 5)		es Acquired (A) or Of (D) (Instr. 3, 4 a		nd Securities Beneficially Owned Follow		Form: (D) or	n: Direct I r Indirect E Instr. 4)	7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) or (D)	Price	Reported Transacti (Instr. 3 a	ion(s)			(Instr. 4)
Common Stock 01/30/2			2009			р		1,000	A	\$0.75	6 4,111	1,565		I	Frost Gamma Investments Trust <sup>(1)</sup>		
		Ta	ble II -				ties Acqu warrants,						y Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	med on Date, Day/Year)	Date, Transactio Code (Inst		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	6. Date Expirat (Month	tion Da		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. Price of Derivative Security (Instr. 5)	erivative derivative ecurity Securitie		10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership t (Instr. 4)

Date Exercisable

Code v

(Middle)

(Zip)

(A) (D) Expiration Date

Amount or Number

of Shares

Title

Street)		
MIAMI	FL	33137-3227
(City)	(State)	(Zip)
	ress of Reporting Personal Investments	
Frost Gamm (Last)	na Investments [	<u>Frust</u>
Frost Gamm (Last)	na Investments (First)	<u>Frust</u>

Explanation of Responses:

1. These securities are held by Frost Gamma Investments Trust, of which the Reporting Person is the trustee. Frost Gamma Limited Partnership is the sole and exclusive beneficiary of Frost Gamma Investments Trust. The Reporting Person is one of two limited partners of Frost Gamma Limited Partnership. The general partner of Frost Gamma Limited Partnership is Frost Gamma, Inc., and the sole shareholder of Frost Gamma, Inc. is Frost-Nevada Corporation, of which the Reporting Person is the sole shareholder.

(City)

(Last)

(State)

1. Name and Address of Reporting Person\* FROST PHILLIP MD ET AL

(First)

<u>/s/ Phillip Frost, M.D.</u> <u>02/02/2009</u>

/s/ Phillip Frost, M.D., as

Trustee

02/02/2009 Date

\*\* Signature of Reporting Person

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

 $^{\ast}$  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.

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 Number.

## Form 4 — Joint Filer Information

Name:	Frost Gamma Investments Trust
Address:	4400 Biscayne Boulevard 15th Floor Miami, Florida 33137
Designated Filer:	Phillip Frost, M.D.
Issuer & Ticker Symbol:	SafeStitch Medical, Inc. (SFES.OB)
Date of Event Requiring Statement:	February 2, 2009

Signature: /s/ Phillip Frost, M.D., Trustee Phillip Frost, M.D., Trustee