

ENDO PHARMACEUTICALS HOLDINGS INC  
Form 4  
October 14, 2005

**FORM 4**

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

OMB APPROVAL

OMB Number: 3235-0287  
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

**STATEMENT OF CHANGES IN 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 \*  
MANOGUE CAROLINE B

2. Issuer Name and Ticker or Trading Symbol  
ENDO PHARMACEUTICALS HOLDINGS INC [ENDP]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)  
100 PAINTERS DRIVE  
(Street)

3. Date of Earliest Transaction (Month/Day/Year)  
10/12/2005

\_\_\_\_ Director \_\_\_\_\_ 10% Owner  
 Officer (give title below) \_\_\_\_\_ Other (specify below)  
Exec. V.P., CLO & Secy

CHADDS FORD, PA 19317

(City) (State) (Zip)

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

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

**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. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Ownership: Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(D)	Price
Common Stock, par value \$.01 per share	10/12/2005		M		50,358	A	\$ 3 50,358
Common Stock, par value \$.01 per share	10/12/2005		M		104,890	A	\$ 3 155,248
Common Stock, par value \$.01 per share	10/12/2005		M		24,662	A	\$ 2.42 179,910

Common Stock, par value \$.01 per share 10/12/2005 S 107,109 D \$ 26.04 72,801 D

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

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**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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative 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 of Underlying Securities (Instr. 3 and 4)	Amount of Underlying Securities (Instr. 3 and 4)
Class C3 Stock Option	\$ 3	10/12/2005		M	50,358	10/12/2005 <sup>(1)</sup> 08/26/2007	Common Stock <sup>(2)</sup>	50,358
Class C4 Stock Option	\$ 3	10/12/2005		M	104,890	10/12/2005 <sup>(1)</sup> 08/26/2007	Common Stock <sup>(2)</sup>	104,890
Class C4 Stock Option	\$ 2.42	10/12/2005		M	24,662	10/12/2005 <sup>(1)</sup> 08/26/2007	Common Stock <sup>(2)</sup>	24,662

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
MANOGUE CAROLINE B 100 PAINTERS DRIVE CHADDS FORD, PA 19317			Exec. V.P., CLO & Secy	

## Signatures

/s/ Caroline B. Manogue 10/14/2005

\*\*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 exercisability of the Stock Options was accelerated in connection with an offering of shares that closed on October 12, 2005.
- (2) Common Stock held by Endo Pharma LLC. The exercise of these stock options did not result in the issuance of additional Common Stock by the Issuer.

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.