FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* WINGER DENNIS L							2. Issuer Name <b>and</b> Ticker or Trading Symbol AP PHARMA INC /DE/ [ APPA ]									all applicable) Director		ng Person(s) to Issue		wner
(Last) (First) (Middle) A.P. PHARMA, INC. 123 SAGINAW DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 03/15/2005												Officer (give title below)		Other (specify below)	
(Street) REDWOOD CITY CA 94063  (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)  6. Individual or Joint/Group Filing Line)  X Form filed by One Report Form filed by More than Person										e Reportin	g Pers	on		
		Tabl	e I - Non	-Deriva	ative	Sec	curitie	s Ac	quired,	Dis	posed o	f, or	Bene	eficia	ally (	Owne	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					ay/Year) if a		A. Deemed Execution Date, f any Month/Day/Year)		Transaction Disposed Code (Instr. 5)		ities Acquired (A) d Of (D) (Instr. 3,			nd	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
										v	Amount	(	(A) or (D)	Price	- 1	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock 03/15/											3,030	)	A	\$1.65		47,971		D		
		Та	ble II - D								sed of, onvertib				y Ov	vned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date, 1	Code (Instr				6. Date E Expiratio (Month/D	n Date	Amount of		str. 3	8. Pri Deriv Secu (Insti	ative deriva Fity Securi Securi Benefi Owned Follow Repor Transa	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owne Form: Direct or Ind (I) (Ins	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or	ount nber ires						

## **Explanation of Responses:**

1. Other acquisition from the issuer exempt under Rule 16b-3d. Shares issued for fourth quarter fees for 2004.

By: Joanne Summy - Attorneyin-fact For: Dennis Winger 03/15/2005

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.