

## UNITED STATES SECURITIES AND EXCHANGE **COMMISSION**

Washington, D.C. 20549

#### INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

OMB APPROVAL			
OMB	3235-		
Number:	0104		
Estimated averag	е		
burden hours per			
response	0.5		

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

(Print or Type Responses)									
1. Name and Address of Reporting Person * LEMAITRE PHILIPPE	Statem (Mont	2. Date of Event Requiring Statement (Month/Day/Year) — 06/19/2007		~	3. Issuer Name and Ticker or Trading Symbol SUN HYDRAULICS CORP [SNHY]				
(Last) (First) (Middle) 1500 WEST UNIVERSITY PARKWAY	) 00/19			Person(s) to I (Check	4. Relationship of Reporting Person(s) to Issuer (Check all applicable)			5. If Amendment, Date Original Filed(Month/Day/Year)	
(Street) SARASOTA, FL 34243					_X_ Director 10% Owner Officer (give lle below) Other (specify below)		6. Indivi Filing(Ch _X_ Form	6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting PersonForm filed by More than One Reporting Person	
(City) (State) (Zip)		Tal	ble I	- Non-Derivati	ive S	Securities 1	Beneficially	Owned	
	respond t	Ben (Ins	ies ber	n of information	For (D) Ind (Ins	onership orm: Direct (I) or (I) str. 5) (I) or tily or indirect (I) strained in	wnership nstr. 5) tly. <b>this form ar</b>		
not required to respond unless the form displays a currently valid OMB control number.									
Table II - Derivative Sec	curities Ber	neficially O	wned	(e.g., puts, calls,	war	rants, optio	ıs, convertibl	e securities)	
1. Title of Derivative Security (Instr. 4)  2. Da and I		nte Exercisable Expiration Date h/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
	Date Exercisable	Expiration Date	Title	Amount or Numb of Shares		Security Do	Security: Direct (D) or Indirect (I) (Instr. 5)		
Danauting Owners									

### Reporting Owners

Reporting Owner Name / Address	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
LEMAITRE PHILIPPE 1500 WEST UNIVERSITY PARKWAY SARASOTA, FL 34243	X				

## **Signatures**

Philippe Lemaitre	06/19/2007
**Signature of Reporting Person	Date

# **Explanation of Responses:**

#### No securities are beneficially owned

- \* If the form is filed by more than one reporting person, see Instruction 5(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.

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.