FORM	4
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#### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

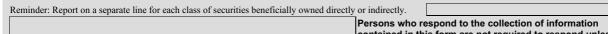
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SEC 1474 (9-02)

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

(rint of Type Responses)											
1. Name and Address of Reporting Person – LEMAITRE PHILIPPE			2. Issuer Name <b>and</b> Ticker or Trading Symbol SUN HYDRAULICS CORP [SNHY]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
1500 WEST UNIV	(First) ERSITY PARK	7337 4 37	3. Date of Earliest Transaction (Month/Day/Year) 03/01/2008				ther (specify be	ow)			
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) X_Form filed by One Reporting Person				
SARASOTA, FL 34243							Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Ta	ble I - Non	-Der	ivative S	ecurities	Acqui	ired, Disposed of, or Beneficially O	wned	
(City) 1.Title of Security	(State)			<b>ble I - Non</b> 3. Transact		1		<u> </u>	ired, Disposed of, or Beneficially O 5. Amount of Securities	wned 6.	7. Nature
	(State)	2. Transaction		3. Transact	ion	4. Securi	ties Acq	uired	5. Amount of Securities	<b>wned</b> 6. Ownership	
1.Title of Security	(State)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any	3. Transact Code (Instr. 8)	ion	4. Securi	ties Acq isposed o	uired of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form:	of Indirect Beneficial
1.Title of Security	(State)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if	3. Transact Code (Instr. 8)	ion	4. Securi (A) or Di	ties Acq isposed o	uired of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D)	of Indirect Beneficial Ownership
1.Title of Security	(State)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any	3. Transact Code (Instr. 8)	ion	4. Securi (A) or Di (Instr. 3,	ties Acq isposed o 4 and 5)	uired of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form:	of Indirect Beneficial Ownership
1.Title of Security	(State)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any	3. Transact Code (Instr. 8)	ion	4. Securi (A) or Di (Instr. 3,	ties Acq isposed o 4 and 5) (A) or	uired of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D)	of Indirect Beneficial Ownership



contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

11. Nature
ship of Indirect
f Beneficial
tive Ownership
y: (Instr. 4)
(D)
rect
+)
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## **Reporting Owners**

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

## Signatures

Gregory C. Yadley, as Attorney-in-Fact for PHILIPPE LEMAITRE	03/04/2008
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).
- Stock Units issued and held for the account of the reporting person under the Amended and Restated 2004 Nonemployee Director Equity and Deferred Compensation Plan. In (1) connection with any distribution to the reporting person under the Plan, Stock Units are payable in shares of common stock on a 1 for 1 basis. The reporting person is fully vested in all Stock Units issued to him and held for his account, and there is no expiration date.

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.