Edgar Filing: FITZGERALD ARI Q - Form 4

FITZGERAL	D ARI Q										
Form 4											
February 22,	2010										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB APPROVAL			
	UNITED	STATES		ITIES Al hington,			NGE (COMMISSION	OMB Number:	3235-0287	
Check this box if no longer									Expires:	January 31, 2005	
subject to	SIAIEN	AENT O	F CHAN	GES IN BENEFICIAL OW				NERSHIP OF	Estimated average		
				SECURITIES					burden hou	burden hours per	
Form 4 or Form 5		suant to	Section 16	5(a) of the	Securiti	es Fr	cchand	ge Act of 1934,	response 0.5		
obligation	⁸ Section $17($						-	of 1935 or Section	m		
may conti See Instru	nue.		of the Inv	•	•	• •					
1(b).	etton				1.						
(Print or Type R	esponses)										
1. Name and Address of Reporting Person _ 2. Issuer Name and Ticker or Trading 5. Relationship of Reporting Person(s							son(s) to				
FITZGERALD ARI Q Symbol CROWN								Issuer			
				WN CASTLE				(Check all applicable)			
INT			INTERN	NTERNATIONAL CORP [CCI]				(Trr			
(Month/D			3. Date of	ate of Earliest Transaction				_X_ Director10% Owner			
			Day/Year)				Difficer (give title Other (specify below) below)				
1220 AUGU	STA, SUITE 50	0	02/18/20)10							
			endment, Date Original				6. Individual or Joint/Group Filing(Check				
			Filed(Mon	Ionth/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person			
HOUSTON,	TX 77057							Form filed by I Person			
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	ecuri	ties Ac	quired, Disposed o	f, or Beneficial	lly Owned	
1.Title of	2. Transaction Dat	te 2A. Dee	2A. Deemed		3. 4. Securities			5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Year)	Execution Date, if		TransactionAcquired (A) or				Form: Direct	Indirect		
(Instr. 3)		any (Month/	any (Month/Day/Year)		Code Disposed of (Instr. 8) (Instr. 3, 4			2	(D) or Indirect (I)	Beneficial Ownership (Instr. 4)	
		(ivionini	Duj, i cui)	(mour o) (mour o, r und o)			Following	(Instr. 4)			
						(A)		Reported			
				Code V	Amount	or (D)	Price	Transaction(s) (Instr. 3 and 4)			
Common					3,248	. ,					
Stock \$0.01	02/18/2010			А	5,248 (1) (2)	А	\$0	21,573 <u>(2)</u>	D		
Par Value											

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

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 control number.

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

 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Under Secur	rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Addre	ess	Relationships						
	Director	10% Owner	Officer	Other				
FITZGERALD ARI Q 1220 AUGUSTA SUITE 500 HOUSTON, TX 77057	Х							
Signatures								
/s/ Ari Q. Fitzgerald	02/19/2010							
<u>**</u> Signature of	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 stock is issued pursuant to the Company's 2004 Stock Incentive Plan, as amended, as a component of non-employee director compensation.
- (2) Such shares are held on behalf of Hogan & Hartson L.L.P. The reporting person has sole voting and shared investment power with respect to all such shares but has no other interest in such shares except to the extent of his pecuniary interest in Hogan & Hartson L.L.P.

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.

Reporting Person