### SCHOLLMAIER EDGAR H

Form 5

February 13, 2006

#### **OMB APPROVAL** FORM 5 **OMB**

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

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

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

2005 Estimated average burden hours per response... 1.0

Number:

Expires:

3235-0362

January 31,

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, 1(b). Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section Reported 30(h) of the Investment Company Act of 1940

Form 4

Transactions Reported

securities beneficially owned directly or indirectly.

SCHOLLMAIER EDGAR H Symbol DEN			Issuer Name <b>and</b> Ticker or Trading /mbol ENTSPLY INTERNATIONAL NC /DE/ [(XRAY)]				5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)				
(Last)	(First) (	(Month	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2005			_X_ Director Officer (g below)	ive title 10% Owner Other (specify below)				
3904 ARLAN LANE											
	(Street)		Amendment, Date Original Month/Day/Year)				6. Individual or Joint/Group Reporting				
								(check applicable line)			
FORT WO	RTH, TX 761	09					_X_ Form Filed Form Filed by Person	by One Reportin by More than On	~		
(City)	(State)	(Zip) Ta	ble I - Non-De	rivative Se	ecuriti	es Acq	uired, Disposed	l of, or Benefic	cially Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code	4. Securi Acquired Disposed (Instr. 3,	d (A) o d of (E	))	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	04/12/2005	Â	J <u>(1)</u>	2,500	D	\$0	22,500	D	Â		
Common Stock	04/12/2005	Â	<u>J(1)</u>	2,500	A	\$0	10,000	I	By Schollmaier Foundation		
Reminder: Re	port on a separate line	e for each class of	Persons w	ho respo	nd to	the co	ollection of in	formation	SEC 2270		

contained in this form are not required to respond unless

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(9-02)

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# 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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	le and	8. Price of
	Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	Number	Expiration D	ate	Amou	ınt of	Derivative
	Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security
	(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)
		Derivative				Securities	Securities (		(Instr.	3 and 4)	
		Security				Acquired					
		•				(A) or					
						Disposed					
						of (D)					
						(Instr. 3,					
						4, and 5)					
										A 4	
										Amount	
							Date	Expiration	m	or	
							·	Date	Title		
										of	
						(A) (D)				Shares	

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
• •	Director	10% Owner	Officer	Other			
SCHOLLMAIER EDGAR H 3904 ARLAN LANE FORT WORTH, TX 76109	ÂX	Â	Â	Â			

## **Signatures**

By: Brian M. Addison, Esquire, POA for 02/13/2006

\*\*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) This is a change in the form of ownership from direct to indirect that did not result in a change to the net number of shares beneficially owned.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.

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