FORM 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0362							
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hours per response:	1.0							

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

Form 3 Holdings Reported.

Form 4 Transactions Reported.

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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Name and Address of Reporting Person* STOTTS JOHN J			2. Issuer Name and Ticker or Trading Symbol CONMED CORP [CNMD]									k all app	tionship of Reporting Person(s) to Iss all applicable)					
(Last)	(Firs	,	Middle)	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2007							y/Year)	X	Director Officer (give titl below) VP PAT			Oth belo	6 Owner er (specify ow)	
(Street) SCHENE (City)	CTADY N		12303 Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)							· · I	Ind ne)	′					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
Date E		2A. Deemed Execution Date, if any		3. Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5				5. Amo Securii Benefi		es	6. Owne	ership	7. Nature of Indirect Beneficial			
(w				(Month/Day/Ye						(A) or (D)	Price	Owned Issuer'		at end of Dir s Fiscal Ind		ct (D) or rect (I) r. 4)	Ownership (Instr. 4)	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	of Deriv Secu Acqu (A) o Disp of (D	ired r psed): . 3, 4 5)		ate Year) Expiration	Amo Secu Und Deri Secu 3 and	Amount or Number of	of De Se	8. Price of Derivative Securitie Beneficia Owned Followin Reported Transacti (Instr. 4)		s s lly	10. Ownersh Form: Direct (D or Indire (I) (Instr. 4)	Beneficial Ownership ect (Instr. 4)		

Explanation of Responses:

/s/ John J. Stotts

08/17/2007

** Signature of Reporting Person Date

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

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.

 $^{^{\}star}$ 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).