

Ozark Holding Inc.
Form 3
January 31, 2006

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,
Section 17(a) of the Public Utility Holding Company Act of 1935 or Section
30(h) of the Investment Company Act of 1940

(Print or Type Responses)

| | | | | | |
|---|---------|----------|---|---|--|
| 1. Name and Address of Reporting Person * | | | 2. Date of Event Requiring Statement | 3. Issuer Name and Ticker or Trading Symbol | |
| Â GARCIA-MOLINA | | | (Month/Day/Year) | Ozark Holding Inc. [ORCL] | |
| HECTOR | | | 01/31/2006 | | |
| (Last) | (First) | (Middle) | 4. Relationship of Reporting Person(s) to Issuer | | 5. If Amendment, Date Original Filed(Month/Day/Year) |
| C/O DELPHI ASSET MANAGEMENT CORPORATION,Â 6005 PLUMAS STREET, SUITE 202 | | | (Check all applicable) | | |
| (Street) | | | <input checked="" type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input type="checkbox"/> Officer <input type="checkbox"/> Other (give title below) (specify below) | | |
| RENO,Â NVÂ 89509 | | | 6. Individual or Joint/Group Filing(Check Applicable Line) | | |
| (City) | | | <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person | | |
| (State) | (Zip) | | | | |

Table I - Non-Derivative Securities Beneficially Owned

| 1. Title of Security (Instr. 4) | 2. Amount of Securities Beneficially Owned (Instr. 4) | 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | 4. Nature of Indirect Beneficial Ownership (Instr. 5) |
|------------------------------------|--|---|--|
| Common stock | 5,000 | D | Â |

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

SEC 1473 (7-02)

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Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of Derivative Security (Instr. 4) | 2. Date Exercisable and Expiration Date | 3. Title and Amount of Securities Underlying | 4. Conversion | 5. Ownership | 6. Nature of Indirect Beneficial Ownership |
|---|---|--|---------------|--------------|--|
|---|---|--|---------------|--------------|--|

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| | (Month/Day/Year) | | Derivative Security (Instr. 4) | | or Exercise | Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 5) | (Instr. 5) |
|--------------|---------------------|--------------------|-----------------------------------|----------------------------------|------------------------------------|--|------------|
| | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | Price of Derivative Security | | |
| Stock Option | Â (1) | 10/15/2011 | Common Stock | 80,000 | \$ 14.94 | D | Â |
| Stock Option | Â (1) | 05/31/2014 | Common Stock | 30,000 | \$ 11.4 | D | Â |
| Stock Option | Â (1) | 05/31/2012 | Common Stock | 40,000 | \$ 8.42 | D | Â |
| Stock Option | Â (1) | 05/24/2013 | Common Stock | 40,000 | \$ 13.01 | D | Â |
| Stock Option | Â (1) | 05/31/2015 | Common Stock | 30,000 | \$ 12.85 | D | Â |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | |
|--|---------------|-----------|---------|-------|
| | Director | 10% Owner | Officer | Other |
| GARCIA-MOLINA HECTOR C/O DELPHI ASSET MANAGEMENT CORPORATION 6005 PLUMAS STREET, SUITE 202 RENO, NV 89509 | Â X | Â | Â | Â |

Signatures

/s/ Barbara Wallace, Attorney in Fact (POA filed
7/15/03) 01/31/2006

**Signature of Reporting Person Date

Explanation of Responses:

- * 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).
- (1) Options vest 25% annually on anniversary of grant date.

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Remarks:

Shares and options to purchase shares of Oracle Systems Corporation common stock were converted

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.