FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

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

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

1. Name and Address of Reporting Person* HENDERSON JIM W						2. Issuer Name and Ticker or Trading Symbol BROWN & BROWN INC [BRO]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Last) (First) (Middle) 220 S RIDGEWOOD AVE						3. Date of Earliest Transaction (Month/Day/Year) 06/19/2008								X Director 10% Owner X Officer (give title below) Urice Chairman and COO					
Street) DAYTONA FL 32114 BEACH				4.	If Ame	ndmen	nt, Date	of Origir	nal Fil	ed (Month/D		6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City)	(S		(Zip)		<u> </u>	tive Securities Acquired, Disposed of, or Beneficially Owned													
1. Title of Security (Instr. 3) 2. Transactic Date (Month/Day/					ction	on 2A. Deemed Execution Date			3. Transa Code (8)	ction	4. Securities Acquired (A) or			5. Amount of Securities Beneficially Owned Follo	Form: Dir (D) or Ind		rect Ir lirect B	Nature of direct eneficial wnership	
									Code	v	Amount	(A) or (D)	Price	Reported Transaction((Instr. 3 and			(1	nstr. 4)	
Common Stock, \$.10 par value 06/19/20						08		S		30,000	D \$20		799,005 ⁽¹⁾		D				
Common Stock, \$.10 par value													19,316	(2)	D				
Common Stock, \$.10 par value													250,000)(3)	I		01(k) Plan		
Common Stock, \$.10 par value													305,283		I	F	tock erformance lan ⁽⁴⁾		
			Table II							,	posed of , convert	,		y Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deer Execution if any (Month/E	n Date,	4. Transa Code (8)		on of E		. Date Exercisable and Expiration Date Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Owners Form: Direct (I or Indire (I) (Instr	Beneficial Ownership ct (Instr. 4)	
					Code	v	(A)		Date Exercisa	ble	Expiration Date	Title	Amount or Number of Shares	;					
Stock Options ⁽⁵⁾	\$15.78								01/22/20	800	03/24/2013	Common Stock	6,336		6,	336	D		
Stock Options ⁽⁵⁾	\$15.78							\Box	01/22/20	009	03/24/2013	Common Stock	6,336		6,	336	D		
Stock Options ⁽⁵⁾	\$18.48								11/26/201	17 ⁽⁶⁾	02/26/2018	Common Stock	200,000)	200	0,000	D		

Explanation of Responses:

- 1. These shares are owned jointly with spouse.
- 2. Number of shares may vary due to dividend reinvestment.
- 3. Number of shares may vary periodically based on contributions to plan.
- 4. These securities were granted pursuant to the Company's Stock Performance Plan. The recipient has voting rights and dividend entitlement with respect to a portion of these shares, however, full ownership will not vest until the satisfaction of additional conditions.
- 5. Granted by the Compensation Committee of the Board of Directors pursuant to the Company's 2000 Incentive Stock Option Plan (the "Plan").
- 6. These options vest and become exercisable on 11/26/17, unless vesting is accelerated based on the satisfaction of conditions established pursuant to the Plan.

LAUREL L. GRAMMIG PER **POWER OF ATTORNEY**

06/20/2008

** Signature of Reporting Person

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

- * 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).

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.