# FORM 4

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

OMB APPROVAL							
MB Number: 3235-028							
stimated average burden							
ours per response	0.5						

longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Typ	e Responses	s)															
1. Name and Address of Reporting Person * Bohunicky Brian John				2. Issuer Name and Ticker or Trading Symbol ORAGENICS INC [ORNI]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner						
(Last) (First) (Middle) 13700 PROGRESS BLVD.			3. Date of Earliest Transaction (Month/Day/Year) 03/11/2011							Tofficer (give title below)  CFO, Secretary and Treasurer							
(Street) ALACHUA, FL 32615				4. If Amendment, Date Original Filed(Month/Day/Year)							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)	(City) (State) (Zip)				Table I - Non-Derivative Securities Acqui							ired, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	Execution	A. Deemed xecution Date, if my Month/Day/Year)		(Instr. 8)		4. Securities Acquire (A) or Disposed of (I (Instr. 3, 4 and 5)		of (D)					Ownership Form:	7. Nature of Indirect Beneficial Ownership
				(Wolldin Day) 1			Code	. V	Amo		(A) or (D) Price		,			· /	(Instr. 4)
Common S	Stock		03/11/2011				A		10,0 (1)	00 A	\$ 0	22,5	00 (2)			D	
Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date, if	(e.g., puts, calls, water the control of Code Der arr) (Instr. 8) Sec Acc (A) Dis		Numb erivation ecurities equired (A) or isposed	rrants, options fumber 6. Da Expir ivative (Mon urities uired		ation Date Ah/Day/Year) A		7. Tit Amor Unde Secur				9. Number of Derivative Securities Beneficially Owned Following Reported	Owners Form of Derivati Security Direct (I or Indire	Beneficia Ownersh (Instr. 4)
						0) nstr. 3, nd 5)	, 4,					Amount			Transaction((Instr. 4)	(I) (Instr. 4	)
				Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title		or Number of Shares				
Employee Stock Option (Right to Buy)	\$ 3.6	03/11/2011		A	20	0,000		(3)	. (	)3/10/202		imon ock	20,000	\$ 0	20,000	D	
Report	ting O	wners															

D ( O N /411	Relationships							
Reporting Owner Name / Address	Director	Director 10% Owner Officer						
Bohunicky Brian John								
13700 PROGRESS BLVD.			CFO, Secretary and Treasurer					
ALACHUA, FL 32615								

# **Signatures**

/s/ Mark A. Catchur, as attorney-in-fact for Brian John Bohunicky	03/15/2011
**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) Such restricted stock will become vested as follows: one-half six months after the date of grant (9/11/2011), and one-half on the one-year anniversary of the date of grant (3/11/2012). Notwithstanding such time vesting, the restricted stock shall become immediately vested in full in the event of a change in control of the Company.
- (2) Share amounts reflected are after adjustment for the Company's 1 for 20 reverse stock split that occurred September 24, 2010.
- Such stock option may be exercised as follows: one-third on the first anniversary of the date of grant (3/11/2012), with an additional one-third becoming exercisable on each of the (3) following two anniversaries of the date of grant. Notwithstanding such time vesting, the options shall become immediately vested in full in the event of a change in control of the Company as specified in the stock option agreement between Mr. Bohunicky and the Company.

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.