# ENDOCARE INC Form SC 13G/A February 11, 2004

1

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

SCHEDULE 13G

UNDER THE SECURITIES EXCHANGE ACT OF 1934

(AMENDMENT NO. \_\_\_\_2\_\_)\*

ENDOCARE, INC.

(Name of Issuer)

Common Stock

(Title of Class of Securities)

\*The remainder of this cover page shall be filled out for a reporting person's initial filing on this form with respect to the subject class of securities, and for any subsequent amendment containing information which would alter the disclosures provided in a prior cover page.

The information required in the remainder of this cover page shall not be deemed to be "filed" for the purpose of Section 18 of the Securities Exchange Act of 1934 ("Act") or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, see the Notes).

2

Cusip No. 29264P104

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13G

1. NAME OF REPORTING PERSON S.S. OR I.R.S. IDENTIFICATION NO. OF ABOVE PERSON

State of Wisconsin Investment Board 39-6006423

2. CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP  $\ \ \ast$ 

Not Applicable

(a)\_\_\_\_\_ (b)\_\_\_\_\_

3. SEC USE ONLY

4. CITZENSHIP OR PLACE OF ORGANIZATION

## Edgar Filing: ENDOCARE INC - Form SC 13G/A

Madison, Wisconsin

| NUMBERS OF   | 5. SOLE VOTING POWER                             |
|--|--|
| SHARES   | 3,075,500  |
| BENEFICIALLY   |  |
| OWNED BY   | 6. SHARED VOTING POWER                           |
| EACH   | Not Applicable                                   |
| REPORTING  | Not hppitodbie                                   |
| PERSON   | 7. SOLE DISPOSITIVE POWER                        |
| WITH   | 3,075,500  |
| WIII   | 5,075,500  |
|  | 8. SHARED DISPOSITIVE POWER                      |
|  |  |
|  | Not Applicable                                   |
| 9. AGGREGATE AMOUNT BENEFICALLY OWNED BY EACH REPORTING PERSON |  |
| J. AGGREGATE AMOU  | 3,075,500  |
|  | 5,075,500  |
| 10 CHECK BOX IE  | THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN |
| SHARES *   | Not Applicable                                   |
| SHAKES "   | NOC APPLICADIE                                   |
| 11 DEDCENT OF CI   | ASS REPRESENTED BY AMOUNT IN ROW 9               |
| 12.65  |  |
|  | 12.05  |
| 12. TYPE OF REPORTING PERSON *                                 |  |
| EP (Public Pension Fund)                                       |  |
| Er (ruu  | file relision rund,                              |
|  |  |
|  | * SEE INSTRUCTIONS BEFORE FILLING OUT!           |
|  | SEE INSTROCTIONS DELOKE LITTING ANI:             |

3

#### ITEM 1. ISSUER

- (a) ENDOCARE, INC.
- (b) 201 Technology Drive Irvine, CA 92618 USA

#### ITEM 2. PERSON FILING

- (a) State of Wisconsin Investment Board
- (b) P.O. Box 7842
  - Madison, WI 53707
- (c) Wisconsin State Agency
- (d) See cover page
- (e) See cover page
- ITEM 3. THIS STATEMENT IS FILED PURSUANT TO 13d-1(b) or 13d-2(b) AND THE STATE OF WISCONSIN INVESTMENT BOARD IS A GOVERNMENT AGENCY WHICH MANAGES PUBLIC PENSION FUNDS SUBJECT TO PROVISIONS COMPARABLE TO ERISA.

### ITEM 4. OWNERSHIP

- (a) See Row 9 on Page 2
- (b) See Row 11 on Page 2
- (c) The State of Wisconsin Investment Board retains sole voting and dispositive power for all shares.
- ITEM 5. IF THIS STATEMENT IS BEING FILED TO REPORT THE FACT THAT AS OF THE DATE HEREOF THE REPORTING PERSON HAS CEASED TO BE THE BENEFICIAL OWNER OF MORE THAN FIVE PERCENT OF THE CLASS OF SECURITIES, CHECK THE FOLLOWING \_\_\_\_\_.

ITEM 6. NOT APPLICABLE

ITEM 7. NOT APPLICABLE

ITEM 8. NOT APPLICABLE

ITEM 9. NOT APPLICABLE

ITEM 10. CERTIFICATION

By signing below I certify that, to the best of my knowledge and belief, the securities referred to above were acquired in the ordinary course of business and were not acquired for the purpose of and do not have the effect of changing or influencing the control of the issuer of such securities and were not acquired in connection with or as a participant in any transaction having such purpose or effect.

#### SIGNATURE

After reasonable inquiry to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

February 16, 2004 Date /s/ Jean Ledford Signature

Jean Ledford, Chief Investment Officer - Public Equities

Name/Title