

RENAISSANCERE HOLDINGS LTD
 Form 3/A
 April 04, 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)

<p>1. Name and Address of Reporting Person *</p> <p>Â Wilcox Mark Alexander</p> <p>(Last) (First) (Middle)</p> <p>RENAISSANCE HOUSE,Â 8-20 EAST BROADWAY</p> <p>(Street)</p> <p>PEMBROKE HM 19, BERMUDAÂ</p> <p>(City) (State) (Zip)</p>	<p>2. Date of Event Requiring Statement</p> <p>(Month/Day/Year)</p> <p>03/01/2006</p>	<p>3. Issuer Name and Ticker or Trading Symbol</p> <p>RENAISSANCERE HOLDINGS LTD [RNR]</p>	<p>4. Relationship of Reporting Person(s) to Issuer</p> <p>(Check all applicable)</p> <p><input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other (give title below) (specify below) SVP, CAO and Controller</p>	<p>5. If Amendment, Date Original Filed(Month/Day/Year)</p> <p>03/13/2006</p>	<p>6. Individual or Joint/Group Filing(Check Applicable Line)</p> <p><input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person</p>
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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	9,838 ⁽¹⁾	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 (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative	5. Ownership Form of Derivative Security:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
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Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Security	Direct (D) or Indirect (I) (Instr. 5)
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Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Wilcox Mark Alexander RENAISSANCE HOUSE 8-20 EAST BROADWAY PEMBROKE HM 19, BERMUDA	^	^	^ SVP, CAO and Controller	^

Signatures

/s/ Mark A. Wilcox 04/04/2006

**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).
In total comprised of 1,574 Common Shares which have vested or vest within 60 days from the date of this statement, and 8,264 (1) Common Shares which have not vested. All of such shares vest ratably in four equal annual installments from the respective dates of grants.

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Remarks:

This amendment corrects the inadvertent omission from the filing person's initially filed Form 3, and Form 4's, of a total of 53 common shares erroneously added to the reporting person's previously reported holdings, comprised of 57 common shares inadvertently included but withheld by the Issuer in a withholding tax liability on March 21, 2005; 3 shares inadvertently omitted but purchased under an automatic dividend reinvestment program on dates prior to the triggering date of this filing; and 1 share under such brokerage account automatic dividend reinvestment program on March 31, 2006.

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.