StealthGas Inc. Form SC 13G February 10, 2014

# SECURITIES AND EXCHANGE COMMISSION WASHINGTON, D.C. 20549

### SCHEDULE 13G

## INFORMATION TO BE INCLUDED IN STATEMENTS FILED PURSUANT TO RULES 13d-1(b), (c), AND (d) AND AMENDMENTS THERETO FILED PURSUANT TO RULE 13d-2

(ANGENIDAGENICALO ) +

(AMENDMENT NO.)**
Stealthgas Inc.
(Name of Issuer)
Common Stock
(Title of Class of Securities)
Y81669106
(CUSIP Number)
12/31/2013
(Date of Event Which Requires Filing of this Statement)

Check the appropriate box to designate the rule pursuant to which this Schedule is filed:

X	Rule 13d-1(b)
0	Rule 13d-1(c)
0	Rule 13d-1(d)

<sup>\*</sup>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).

Page 1 of 4 Pages

CUSIP NO. Y81669106	13G	Page 2 of 4 Pages			
1. NAME	E OF REPORTING PERSO	ONS			
Massachusetts Financial Services Company ("M	(FS")				
2. CHECK THE APPROPRISE (SEE INSTRUCTIONS)	PRIATE BOX IF A MEMB	EER OF A GROUP			
a) o (b) o					
Not Applicable					
3.	SEC USE ONLY				
4. CITIZENSHI	P OR PLACE OF ORGAN	IZATION			
Delaware					
NUMBER OF SHARES BENEFICIALLY OW	NED BY EACH REPORT	ING PERSON WITH:			
5. S	SOLE VOTING POWER				
1,589,140 shares of common stock					
6. SH	IARED VOTING POWER				
None					
7. SOI	LE DISPOSITIVE POWER	2			
1,672,020 shares of common stock					
8. SHAF	RED DISPOSITIVE POWI	ER			
None					
9. AGGREGATE AMOUNT BENER	FICIALLY OWNED BY E	ACH REPORTING PERSON			
1,672,020 shares of common stock, consisting or non-reporting entities.	f shares beneficially owned	by MFS and/or certain other			
10.CHECK IF THE AGGREGATE AMOUNT INSTRUCTIONS)	IN ROW (9) EXCLUDES	CERTAIN SHARES (SEE	o		
Not Applicable					
11. PERCENT OF CLASS	S REPRESENTED BY AM	10UNT IN ROW 9			

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5.2	
12.	TYPE OF REPORTING PERSON (SEE INSTRUCTIONS)
IA	

Schedule	e 13G		Page 3 of 4 Pages		
ITEM 1:		(a)	NAME OF ISSUER:		
See Cove	er Page				
(b)	ADDRESS OF	F ISSUER'S PRINCIPAL	EXECUTIVE OFFICES:		
	ssias Avenue Er thens, Greece	rithrea			
ITEM 2:		(a)	NAME OF PERSON FILING:		
See Item	1 on page 2				
	(b)	ADDRESS OF PRINCIP	AL BUSINESS OFFICE OR, IF NONE, RESIDENCE:		
	tington Avenue MA 02199				
(c)	CITIZENSHIP	).			
See Item	4 on page 2				
(d)	TITLE OF CL	ASS OF SECURITIES:			
See Cove	er Page				
(e)	CUSIP NUMBER:				
See Cove	er Page				
ITEM 3: Rule 13d	I-1(b)(1)(ii)(E)	The person filing	is an investment adviser in accordance with		
ITEM 4:			OWNERSHIP:		
(a)	AMOUNT BENEFICIALLY OWNED:				
See Item	9 on page 2				
(b)	PERCENT OF CLASS:				
See Item	11 on page 2				
(c)NUN	MBER OF SHA	RES AS TO WHICH SUC	TH PERSON HAS VOTING AND DISPOSITIVE POWERS		

(SOLE AND SHARED):

See Items 5-8 on page 2

ITEM 5: OWNERSHIP OF FIVE PERCENT OR LESS OF A CLASS:

O

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Schedule 13G Page 4 of 4 Pages

ITEM 6: OWNERSHIP OF MORE THAN FIVE PERCENT ON BEHALF OF ANOTHER PERSON:

Not Applicable

ITEM IDENTIFICATION AND CLASSIFICATION OF THE SUBSIDIARY WHICH ACQUIRED THE 7: SECURITY BEING REPORTED ON BY THE PARENT HOLDING COMPANY OR CONTROL PERSON:

Not Applicable

ITEM 8: IDENTIFICATION AND CLASSIFICATION OF MEMBERS OF THE GROUP:

Not Applicable

ITEM 9: NOTICE OF DISSOLUTION OF GROUP:

Not Applicable

ITEM 10: CERTIFICATIONS:

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

#### **SIGNATURE**

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

Date: February 7, 2014

Massachusetts Financial Services Company

By: /s/ DANIEL W. FINEGOLD

Daniel W. Finegold

Vice President and Assistant Secretary