Edgar Filing: StealthGas Inc. - Form SC 13G/A

StealthGas Inc. Form SC 13G/A February 12, 2015

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

(AMENDMENT NO 1)*

	(AMENDMENT NO. 1)**
	StealthGas Inc.
	(Name of Issuer)
	Common Stock
	(Title of Class of Securities)
	Y81669106
	(CUSIP Number)
	12/31/2014
(Da	ate 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)
O	Rule 13d-1(d)

^{*}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 OF I	REPORTING PE	RSONS					
Massachusetts Financial Services Company ("MFS")							
2. CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (SEE INSTRUCTIONS)							
a) o (b) o							
Not Applicable							
3. SI	EC USE ONLY						
4. CITIZENSHIP OR	PLACE OF ORC	ANIZATION					
Delaware							
NUMBER OF SHARES BENEFICIALLY OWNED BY EACH REPORTING PERSON WITH:							
5. SOLE	VOTING POWE	R					
1,819,179 shares of common stock							
6. SHARE	D VOTING POW	ER					
None							
7. SOLE DI	ISPOSITIVE POV	VER					
1,819,179 shares of common stock							
8. SHARED	DISPOSITIVE PO	OWER					
None							
9. AGGREGATE AMOUNT BENEFICIA	ALLY OWNED B	Y EACH REPORTING PERSON					
1,819,179 shares of common stock, consisting of shares beneficially owned by MFS and/or certain other non-reporting entities.							
10.CHECK IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES (SEE INSTRUCTIONS)							
Not Applicable							
11 PERCENT OF CLASS REI	PRESENTED BY	AMOUNT IN ROW 9					

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4.2	
12.	TYPE OF REPORTING PERSON (SEE INSTRUCTIONS)
IA	

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Schedul	e 13G		Page 3 of 4 Pages				
ITEM 1:	:	(a)	NAME OF ISSUER:				
See Cov	er Page						
(b)	ADDRESS OF ISSUER'S PRINCIPAL EXECUTIVE OFFICES:						
	ssias Avenue Enthens, 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:				
	ntington Avenue MA 02199						
(c)	CITIZENSHIE).					
See Item	4 on page 2						
(d)	TITLE OF CLASS OF SECURITIES:						
See Cov	er Page						
(e)	CUSIP NUMBER:						
See Cov	er Page						
ITEM 3: Rule 13d	d-1(b)(1)(ii)(E)	The person filing i	s an investment adviser in accordance with				
ITEM 4	:		OWNERSHIP:				
(a)	AMOUNT BE	ENEFICIALLY OWNED:					
See Item	9 on page 2						
(b)	PERCENT OF	FCLASS:					
See Item	11 on page 2						
	MBER OF SHA LE AND SHAR		CH PERSON HAS VOTING AND DISPOSITIVE POWERS				

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See Items 5-8 on page 2

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

X

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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 12, 2015

Massachusetts Financial Services Company

By: /s/ DANIEL W. FINEGOLD

Daniel W. Finegold

Vice President and Assistant Secretary