

OCA, INC. / DE /  
Form 3/A  
May 02, 2005

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

OMB Number: 3235-0104  
Expires: January 31, 2005  
Estimated average burden hours per response... 0.5

**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)

1. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name <b>and</b> Ticker or Trading Symbol	
Â Englander Daniel J		(Month/Day/Year)	OCA, INC. / DE / [OCA]	
(Last)	(First)	(Middle)	05/03/2004	
323 RAILROAD AVENUE		4. Relationship of Reporting Person(s) to Issuer		
(Street)		(Check all applicable)		
GREENWICH,Â CTÂ 06830		<input type="checkbox"/> Director <input checked="" type="checkbox"/> 10% Owner <input type="checkbox"/> Officer <input checked="" type="checkbox"/> Other (give title below)    (specify below) <input type="checkbox"/> Member of Section 13(d) Group		
(City)	(State)	(Zip)	5. If Amendment, Date Original Filed(Month/Day/Year)	
			05/05/2004	
1. Title of Security		2. Amount of Securities Beneficially Owned		3. Ownership Form:
(Instr. 4)		(Instr. 4)		Direct (D) or Indirect (I)
Common Stock		10,200 <sup>(1)</sup>		(Instr. 5)
Common Stock		4,000		D    Â
				I <sup>(2)</sup> By Englander Family Accounts

**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	10,200 <sup>(1)</sup>	D	Â
Common Stock	4,000	I <sup>(2)</sup>	By Englander Family Accounts

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 (7-02)

**Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.**

**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)
--	--	---	---	---	---

Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Security	Direct (D) or Indirect (I) (Instr. 5)
---------------------	--------------------	-------	----------------------------------	----------	--

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Englander Daniel J 323 RAILROAD AVENUE GREENWICH, CT 06830	Â	Â X	Â	Member of Section 13(d) Group

## Signatures

/s/ Daniel J. Englander  
05/02/2005

\_\_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).
- (1) This Form 3 corrects (i) the number of shares for which direct beneficial ownership was reported in the original Form 3, which was overstated by 10,000, and (ii) the number of shares for which indirect beneficial ownership was reported in the original Form 3, which was overstated by 2,000 shares. The Reporting Person's direct beneficial ownership was similarly overstated in a subsequently filed Form 4.
- (2) Reported shares are owned directly by accounts established for the benefit of certain family members of the Reporting Person. The Reporting Person disclaims beneficial ownership of these shares in excess of his pecuniary interest therein.

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.