SEC Form 3

FORM 3

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

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

	Id Address of Repo	•	2. Date of Event Requiring Statem (Month/Day/Year	nent (3. Issuer Name and Ticker or Trading Symbol Castlewood Holdings LTD [ESGR]					
(Street)	(First) DISON AVE. OMERY AL (State)	(Middle) 36104 (Zip)	01/31/2007 		 Relationship of Reporting Per- Check all applicable) X Director Officer (give title below) 	son(s) to Issu 10% Own Other (spe below)	er 6. Ir	hth/Day/Year) ndividual or Joir licable Line) Form filed b Person	Date of Original Filed ht/Group Filing (Check by One Reporting by More than One Person	
			Table I - Non	-Derivativ	ve Securities Beneficial	y Owned				
1. Title of Security (Instr. 4)					Amount of Securities meficially Owned (Instr. 4)			Nature of Indirect Beneficial Ownership str. 5)		
No securities are beneficially owned					0	D				
					Securities Beneficially nts, options, convertible		s)			
1. Title of Derivative Security (Instr. 4) 2. Date Exer Expiration D (Month/Day/* Date Exercisable			te	3. Title and Amount of Secur Underlying Derivative Secur 4)		4. Conversion or	Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)		
				Expiration Date	Title	Amount or Number of Shares	Exercise Price of Derivative Security	Direct (D) or Indirect (I) (Instr. 5)		

Explanation of Responses:

Remarks:

Nimrod T. Frazer

01/31/2007

Date

** Signature of Reporting Person

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.