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

OMB APP	ROVAL
OMB Number:	3235-0287
Estimated average	ge burden
hours per respor	ise 0.5

longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN 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

1. Name and Address of Reporting Person * CARLSON ALLEN J			2. Issuer Name and Ticker or Trading Symbol SUN HYDRAULICS CORP [SNHY]				5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director						
(Last) (First) (Middle) 1500 WEST UNIVERSITY PARKWAY			3. Date of Earliest Transaction (Month/Day/Year) 12/23/2004											
(Street) SARASOTA, FL 34243			4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) X_Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City) (State) (Zip)			Table I - Non-Derivative Securities Acqu					Acquir	lired, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Y		2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr. 8)	4. Securities Acqu (A) or Disposed o (D) (Instr. 3, 4 and 5)		f Beneficia		ally Owned Following I Transaction(s)		Ownership of Form: Direct (D)	Beneficial Ownership	
					Code	V A	mount	(A) or (D)	Price	ce			or Indirect (I) (Instr. 4)	(Instr. 4)
Common	Stock		12/23/2004		S	1:	25	D :	\$ 16 3	32,993			D	
Reminder: indirectly.	Report on a	separate line fo	or each class of secu	rities beneficially o			o u-b -	roces	nd 4 = 4	ho cell-	otion of i	oformation	CT	C 1474 (0
	Report on a	separate line fo	Table II - D	Derivative Securition	es Acquire	Person contain the for	ned in m disp	this for plays a c	m are currer eficiall	not req itly valid	uired to re d OMB cor	nformation espond unlo ntrol numbe	ess	C 1474 (9- 02)
1. Title of		3. Transaction	Table II - D	Derivative Securitics, puts, calls, wa 4. te, if Transaction Code Year) (Instr. 8)	es Acquire	Person contain the form ed, Dispetions, co	ned in m disp osed of, nvertil Exerci piration	this for blays a constitution of the securisable in Date	m are currer eficiall rities) 7. Tit Amor Unde Secur	not requitly valid y Owned the and unt of orlying	uired to red OMB con	espond unl	f 10. Ownersh Form of Derivativ Security: Direct (I or Indire	11. Naturip of Indire. Beneficia Ownersh (Instr. 4)

Post Control Name (Address	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
CARLSON ALLEN J 1500 WEST UNIVERSITY PARKWAY SARASOTA, FL 34243	X		President, CEO			

Signatures

Gregory C. Yadley, as Attorney-in-Fact for ALLEN J. CARLSON		12/27/2004
Signature of Reporting Person		Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 4(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.

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.