

SYKES ENTERPRISES INC

Reported by **HOBBY JAMES**

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 03/09/11 for the Period Ending 03/07/11

Address 400 NORTH ASHLEY DRIVE

TAMPA, FL 33602

Telephone 8132741000

CIK 0001010612

Symbol SYKE

SIC Code 7373 - Computer Integrated Systems Design

Industry Computer Networks

Sector Technology

Fiscal Year 12/31





[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE **COMMISSION**

Washington, D.C. 20549

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STATEMENT OF CHANGES IN 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(f) of the Investment Company Act of 1940

1. Name and Address of Reporting Person *				2	2. Issuer Name and Ticker or Trading Symbol							ng Symb		5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
Hobby James					SYKES ENTERPRISES INC [SYKE]							С	Direct	or	_	10% Ov	wner
(Last) (First) (Middle)				3	3. Date of Earliest Transaction (MM/DD/YYYY)							DD/YYYY	below)	X Officer (give title below) Other (specify below) Executive Vice President			
400 N ASHLEY DRIVE, SUITE 2800					3/7/2011								Executive	vice Pr	esident		
(Street)					4. If Amendment, Date Original Filed (MM/DD/YYYY)							ed		6. Individual or Joint/Group Filing (Check Applicable Line)			
TAMPA, FL 33602 (City) (State) (Zip)														_ X _ Form filed by One Reporting Person Form filed by More than One Reporting Person			
		Table	I - Non-	Deriv	at	ive Secur	ities	Acc	quire	d, Dis	po	sed of, o	or Beneficially	y Owned			
1.Title of Security (Instr. 3)					2. Trans. Date	2A. Deemed Execution Date, if	3. Tra Code (Instr.	(A) or Disposed		ed c	of (D) Fo		ng Reported Transaction(s) and 4)		Ownership Form:	7. Nature of Indirect Beneficial Ownership	
				any		Code	e V	Amou	(A) or unt (D) Price		Price		or II (I) (4)			irect (Instr. 4)	
Common Stock 3				3/7/20	011 S 15900 D \$18.5017 4077					D							
Common Stock 3/				3/7/20)11		S		1077	1077 D \$18.50 3000			D				
Tabl	le II - Dei	rivative	Securiti	es Be	ne	ficially C)wne	ed (e.g. ,	puts,	cal	ls, warr	ants, options	, convert	ible secur	rities)	
1. Title of Derivate Security (Instr. 3)			Code	8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date			:			8. Price of Derivative Security (Instr. 5)	of derivative Securities Beneficially Owned Following	Security: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	V	(A)		Date Exerc	cisable	Expirat Date	ion	Title	Amount or Number of Shares		Reported Transaction (s) (Instr. 4)	(I) (Instr. 4)	
Stock Appreciation Rights	\$18.67	3/7/2011		A		22315			(1)	(1)		Common Stock	22315	\$0	22315	D	
Restricted Stock	\$18.67	3/7/2011		A		25455			(2)	(2)		Common Stock	25455	\$0	25455	D	

Explanation of Responses:

- (1) The stock appreciation rights were granted to the Reporting Person pursuant to the Issuer's 2001 Equity Incentive Plan and 1/3 will vest annually on and after each March 7, 2012, March 7, 2013, and March 7, 2014.
- (2) The Restricted Stock was granted to reporting person pursuant to the Issuer's 2001 Equity Incentive Plan and vesting is subject to previously established specific performance criteria through March 7, 2014.

Reporting Owners

Paparting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Hobby James							

400 N ASHLEY DRIVE		
SUITE 2800	Executive Vice President	
TAMPA, FL 33602		

Signatures

/s/ James T. Holder as attorney-in-fact for James Hobby Date

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 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. 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.

^{**} Signature of Reporting Person