FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| Check this box if no longer subject to |
|--|
| Section 16. Form 4 or Form 5 |
| obligations may continue. See |
| Instruction 1(h) |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0287
Estimated average burden
hours per response: 0.5

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

| Name and Address of Reporting Person* Clarke Ronald | | | | | | | 2. Issuer Name and Ticker or Trading Symbol FLEETCOR TECHNOLOGIES INC FLT | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|---|---|--|---|---------|------------------------------|---|--|--------|---|--------|--|--|--|-------------------------------|---|---|--|--|--|--|
| Clarke Rollalu | | | | | | | | | | | | | | X Direc | | | 10% Ow | | | |
| (Last) (First) (Middle) 655 ENGINEERING DRIVE SUITE 300 | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 01/17/2012 | | | | | | | | belov | CEO & President | | | | | |
| (Street) NORCROSS GA 30092 | | | | | | Line) X Form filed | | | | | | | | | | int/Group Filing (Check Applicable and by One Reporting Person and by More than One Reporting | | | | |
| (City) (State) (Zip) | | | | | | | | | | | | | | | | | | | | |
| | | | le I - No | | | | | | _ | l, Di | sposed o | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day | | | | | | r) E | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a | | | Benefi Owned | ies cially Following | Form | : Direct r Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | Code | v | Amount | (A) or (D) | Price | Report Transa (Instr. : | ed ction(s) 3 and 4) | | (| Instr. 4) | | |
| Common Stock ⁽¹⁾ 0 | | | | | 01/17/2012 | | | | | | 2,900 | A | \$2.30 |)8 3,1 | 37,517 | | D | | | |
| Common Stock ⁽¹⁾ | | | | | 01/17/2012 | | | | | | 2,900 | D | \$32.7 | 75 3,1 | 84,617 | | D | | | |
| Common Stock ⁽¹⁾ 01/1 | | | | | 3/2012 | | | | M | | 39,415 | A | \$2.30 |)8 3,2 | 24,032 | | D | | | |
| Common Stock ⁽¹⁾ 01/18 | | | | | 3/2012 | 2012 | | | S | | 39,415 | D | \$32.82 | 272 3,1 | 84,617 | 4,617 | | | | |
| Common Stock ⁽¹⁾ 01/19/ | | | | | /2012 | 2012 | | | M | | 27,085 | A | \$2.30 |)8 3,2 | 11,702 | | D | | | |
| Common Stock ⁽¹⁾ 01/19/2 | | | | | /2012 | 012 | | | S | | 27,085 | D | \$33.07 | 726 3,1 | 84,617 | | D | | | |
| Common Stock ⁽¹⁾ 01/19/2 | | | | | /2012 | 012 | | | S | | 12,870 | D | \$33.07 | 726 3,1 | 71,747 | | D | | | |
| | | - | Table II | | | | | | | | oosed of, convertil | | | y Owned | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deen Execution if any (Month/D | n Date, | 4. Transa Code (8) | | | | 6. Date Expirati (Month/ | on Da | | 7. Title and Amor of Securities Underlying Derivative Secur (Instr. 3 and 4) | | Derivative Security | | e s Illy | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | v | (A) | (D) | Date Exercis | able | Expiration Date | Title | Amount or Number of Shares | 1 | | | | | | |
| Employee Stock Options ⁽¹⁾ | \$2.308 | 01/17/2012 | | | | | 2,900 01/03/2009 01/03/2015 Common Stock | | 2,900 | \$0.00 | 552,832 | | D | | | | | | | |
| Employee Stock Options ⁽¹⁾ | \$2.308 | 01/18/2012 | | | M | | | 39,415 | 01/03/2 | 009 | 01/03/2015 | Common Stock | 39,415 | \$0.00 | 513,41 | 17 | D | | | |
| Employee Stock Options ⁽¹⁾ | \$2.308 | 01/19/2012 | | | M | | | 27,085 | 01/03/2 | 009 | 01/03/2015 | Common Stock | 27,085 | \$0.00 | 486,33 | 32 | D | | | |

Explanation of Responses:

1. Pursuant to 10b5-1 sales plan

Remarks:

/s/ Sean Bowen, under power of attorney 01/19/2012

** Signature of Reporting Person

erson Da

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

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.

 $^{^{\}star}$ 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).