

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

OMB APPROVAL				
OMB Number:	3235-0104			
Estimated average burden				
nours per response	e 0.5			

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

(Print or Type Responses)									
Name and Address of Reporting Person * Goettl Chris	Stateme	2. Date of Event Requiring Statement (Month/Day/Year)		3. Issuer Name and Ticker or Trading Symbol APA Enterprises, Inc. [APAT]					
(Last) (First) (Middle) 2950 NE 84TH LANE	00/00/			4. Relationship of Reporting Person(s) to Issuer				5. If Amendment, Date Original Filed(Month/Day/Year)	
(Street) BLAINE, X1 55449				(Check all applicable) Director			ify Ap	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 Beneficially Owned					ned		
Persons who respond to the collection of information contained in this form are not required to respond							SEC 1473 (7-02)		
unless the form displays a currently valid OMB control number. Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)									
(Instr. 4) Expiration Date Und			Title and Amount of Securities aderlying Derivative Security astr. 4)		4. Conversion or Exercise Price of	Form of Deriva	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
Da Ex	ate ercisable	Expiration Date	Title	Amount or Num of Shares	ıber	Derivative Security	Securi Direct Indirec (Instr.	(D) or ct (I)	
Incentive Stock Option 10	0/18/2005	01/18/2010	Common	2,000		\$ 1.45		D	

Reporting Owners

Denouting Owner Name /	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Goettl Chris 2950 NE 84TH LANE BLAINE, X1 55449				Controller		

Signatures

Chris M. Goettl	06/16/2006
***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).

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.