### Edgar Filing: AINSLIE MICHAEL L - Form 4

AINSLIE M	ICHAEL L										
Form 4											
May 13, 200											
FORM	<b>14</b>		CECUD				NCEC			PROVAL	
	UNITED S	STATES					NGE C	COMMISSION	OMB	3235-0287	
Check th	is box		vv as	shington,	D.C. 20	549			Number:	January 31,	
if no longer				GES IN	RENEE	CTA	LOW	NERSHIP OF	Expires: 200		
subject to Section 1	5	STATEMENT OF CHANGES IN BENEFICIAL SECURITIES							Estimated average		
Form 4 o		SECONTIES							burden hours per response 0.5		
Form 5	Filed pure	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,								0.0	
obligatio may cont	ns Section 17(s						•	1935 or Section	1		
See Instr		30(h)	of the In	vestment	Compan	y Ac	t of 194	0			
1(b).											
(Duint an Tana I	<b>D</b> )										
(Print or Type I	(kesponses)										
1. Name and A	Address of Reporting I	Person *	2 Issue	· Name and	Ticker or	Tradii	ות	5. Relationship of	Reporting Pers	son(s) to	
AINSLIE MICHAEL L Symbol				Name and Ticker or Trading				Issuer			
			•	CO [JOE	2]						
(Last)	(First) (N	(iddle)	3. Date of Earliest Transaction (Che				ck all applicable)				
(Eust)	(1150) (1	induite)	(Month/D					_X_ Director 10% Owner			
245 RIVERSIDE AVENUE, SUITE 05/11/20			•				Officer (give title Other (specify				
500								below)	below)		
	(Street)		4. If Ame	ndment, Da	te Origina	l		6. Individual or Jo	int/Group Filin	g(Check	
			nth/Day/Year)				Applicable Line)				
								_X_ Form filed by C Form filed by M			
JACKSON	VILLE, FL 32202							Person		porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction Date			3.	4. Securi			5. Amount of	6. Ownership		
Security (Instr. 3)	(Month/Day/Year)	on Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) Day/Year) (Instr. 8)					Securities Beneficially	Indirect Beneficial			
(IIISU. 5)						5)	Owned	Ownership			
								Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported Transaction(s)			
				~		or	- ·	(Instr. 3 and 4)			
Common				Code V	Amount	(D)	Price \$	,			
Stock	05/11/2009			Μ	2,903	А	ф 18.53	27,510	D		
							10.55				
Common Stock	05/11/2009			А	3,947	А	\$0	31,457	D		

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

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.

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# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. H Der Sec (In:
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option	\$ 18.53	05/11/2009		М	2,903	<u>(1)</u>	05/11/2009	Common Stock	2,903	

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships						
1 0	Director	10% Owner	Officer	Other			
AINSLIE MICHAEL L 245 RIVERSIDE AVENUE SUITE 500 JACKSONVILLE, FL 32202	Х						
Signatures							
/s/ Reece B. Alford, by power of attorney	of	f 05/13/2009					
<u>**</u> Signature of Reporting Person		Da	ite				

### **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).

(1) The options vested in three annual installments commencing on May 11, 2000.

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.