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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| Check this box if no longer subject Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). | to |
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

| OMB APPRC | VAL |
|-------------------------|-----------|
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| | ddress of Reporting | | | ier Name and Tick <u>GENCY CEN</u> | | | | tionship of Reportir all applicable) Director | o () | ssuer Dwner |
|---------------------------------------|-------------------------|-------------------|----------------|--|------------------|----------------------------|------------|---|-------------------|----------------|
| (Last) 500 WATER | (First) STREET, 15TH | (Middle) FLOOR | | e of Earliest Transa 1/2012 | action (Month/D | ay/Year) | | Officer (give title below) | Other below | (specify) |
| | | | 4. If Ai | mendment, Date o | f Original Filed | (Month/Day/Year) | | idual or Joint/Grou | p Filing (Check A | Applicable |
| (Street) JACKSONV | /ILLE FL | 32202 | | | | | Line) X | Form filed by On Form filed by Mo | 1 0 | |
| (City) | (State) | (Zip) | | | | | | Person | | |
| | | Table I - Non- | -Derivative S | Securities Acc | uired, Disp | osed of, or Benefi | cially | Owned | | |
| 1. Title of Security (Instr. 3) 2. Tr | | | 2. Transaction | 2A. Deemed | 3. | 4. Securities Acquired (A) | or | 5. Amount of | 6. Ownership | 7. Nature |

| Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transa Code (1 8) | ction | | | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
|------------------------------|--|---|-------------------------------|-------|--------|---------------|-------|---|---|---|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (1150.4) |

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. Transa Code (8) | | 5. Number 6 of E | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---|---|--|---|------------------------------|---|---------------------|-----|--|--------------------|--|--|---|--|--|--|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |
| Restricted Stock Grant | \$0 | 05/01/2012 | | A | | 2,000 | | (1) | (1) | Common Stock | 2,000 | \$0 | 2,000 | D | |

Explanation of Responses:

1. Shares vest 25% per year beginning on the first anniversary date of grant.

Remarks:

/s/ Michael B. Kirwan,

<u>Attorney-in-Fact for Alvin R.</u> <u>Carpenter</u> <u>05/02/2012</u>

** Signature of Reporting Person 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 Number.