## Edgar Filing: Clements Robert M - Form 4

Form 4 December 04												
FORM	ĪЛ									APPROVAL		
	UNITH	ED STAT			AND EX , D.C. 20		NGE	COMMISSIO	N OMB Number:	3235-0287		
Check thi			vv a5	migton	, <b>D.C.</b> 20	549			Expires:	January 31		
if no long subject to Section 1 Form 4 or Form 5	, <b>SIAI</b> 6. r		OF CHAN	Estimated burden ho response.	ours per							
obligatior may conti <i>See</i> Instru 1(b).	inue. Section	17(a) of th		ility Hol	ding Cor	npany	Act of	of 1935 or Secti				
(Print or Type R	Responses)											
1. Name and A Clements Ro	ddress of Report obert M	ing Person <sup>*</sup>	Symbol		d Ticker or		-	5. Relationship Issuer	of Reporting Pe	erson(s) to		
(Last)	(First)	(Middle)			ransaction	וייבו		(Check all applicable)				
. ,	SIDE AVENU	, ,	(Month/D 11/30/20	ay/Year)	Tansaction			X Director X Officer (gi below) Ch		% Owner ther (specify O		
	(Street)		4. If Ame	ndment, D	ate Origina	1		6. Individual or				
LACKSON	/ILLE, FL 32	202		th/Day/Yea	-			Applicable Line) _X_ Form filed by		Person		
								Person				
(City)	(State)	(Zip)					ities Ac	equired, Disposed		-		
1.Title of Security (Instr. 3)	2. Transaction (Month/Day/Y	ear) Execu any	Deemed ntion Date, if th/Day/Year)	on Date, if TransactionAcquired (A) or Securities Code Disposed of (D) Beneficial Day/Year) (Instr. 8) (Instr. 3, 4 and 5) Owned Following (A) reported Transaction				Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
Common				Code V	Amount	(D)	Price	(Instr. 3 and 4)				
Stock, par value \$0.01 per share	11/30/2012			G	5,500	D	\$ 0	2,177,052	D			
Common Stock, par value \$0.01 per share								917,583 <u>(1) (2)</u>	I	By wife, Ann H. Clements		
Common Stock, par value \$0.01 per share								252,559 <u>(2)</u>	Ι	By wife, Ann H. Clements, as Trustee		

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			of the Robert M. Clements 2010 Grantor Retained Annuity Trust
Common Stock, par value \$0.01 per share	197,505 <u>(2)</u>	I	By wife, Ann H. Clements, as Trustee of the Robert M. Clements Children's Trust
Common Stock, par value \$0.01 per share	98,327	I	As custodian on behalf of his four children

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.

 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. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Clements Robert M 501 RIVERSIDE AVENUE JACKSONVILLE, FL 32202	Х		Chairman and CEO				
Signatures							
By: Jean-Marc Corredor as Attorney-in-Fact		12	/04/2012				
<b>**</b> Signature of Reporting Person			Date				

## **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) Includes 120,888 shares held by the reporting person's wife, Ann H. Clements, as custodian on behalf of three children.
- The reporting person does not have any voting or dispositive power over and disclaims beneficial ownership of these securities, and this(2) report shall not be deemed an admission that the reporting person is the beneficial owner of such securities for purposes of Section 16 or for any other purpose.

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.