FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	S IN BENEFICIA	L OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average bu	ırden								

0.5

hours per response:

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

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

								, ,				1								
	nd Address of	Reporting Person*								or Trad]		(Che	ck all applic	r	Perso	10% Ow	ner
(Last) 3101 W STE 400	MARTIN L	irst) UTHER KING	(Middle) JR BLVD			3. Date of Earliest Transaction (Month/Day/Year) 04/29/2011							X	below)	(give title Regional I	Other (spe below) President		Decily		
(Street) TAMPA FL 33607				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)									Line)	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	State)	(Zip)																	
1. Title of Security (Instr. 3)			2. Tran	2. Transaction		2A. Deemed Execution Date,		3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			(A) or	5. Amour Securitie Beneficia Owned F	s F illy (ollowing (Form:	Direct Ir Indirect B tr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amour	nt (A) or D)	Price	Reported Transact (Instr. 3 a	ion(s)		(1	nstr. 4)	
Common Stock, \$.10 par value				04/2	4/29/2011					S		30,0	000	D \$25.6		48,591(1)		D		
Common Stock, \$.10 par value																160,378(2)		D		
Common Stock, \$.10 par value															8	10		I S	Spouse ⁽³⁾	
			Table II -										of, or E tible s			Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	Date,	4. Transa Code (8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisabl Expiration Date (Month/Day/Year)		ate	e and	7. Title and Amount Securities Underlyin Derivative Security (Instr. 3 and 4)		lerlying urity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transactior (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)		Date Exer	cisable	Exp Date	iration	Title	Nui	nount or mber of ares					
Stock Options ⁽⁴⁾	\$15.78								03/2	23/2013	03/2	4/2013	Commo Stock	n 12	25,016		126,016		D	
Stock Options ⁽⁴⁾	\$18.48								11/1	1/2010	02/2	6/2018	Commo Stock	n 2	20,589		20,589		D	
Stock Options ⁽⁴⁾	\$18.48								11/2	26/2017	02/2	6/2018	Commo	n 10	4,000(5)		104,000		D	

Explanation of Responses:

- 1. Number of shares may reflect reinvested dividends.
- 2. These securities were granted pursuant to the PSP. Based on the satisfaction of conditions established pursuant to the PSP, the Reporting Person has voting rights and dividend entitlement with respect to a portion of these shares based on the satisfaction of certain performance-based criteria, but full ownership will not vest until the satisfaction of additional conditions.
- 3. Reporting Person disclaims beneficial ownership in shares owned by Spouse of Reporting Person.
- 4. Granted by the Compensation Committee of the Board of Directors pursuant to the Company's 2000 Incentive Stock Option Plan (the "Plan").
- 5. These options vest and become exercisable on 11/26/17 unless accelerated based on satisfaction of conditions established pursuant to the Plan.

04/29/2011 C. ROY BRIDGES

** 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.