## Edgar Filing: JOHNSON JULIA L - Form 4

Form 4 August 17, 20											
FORM	Л	Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section								OMB APPROVAL OMB 3235-0287 Number: January 31, 2005 Estimated average burden hours per response 0.5	
Check this if no longe subject to Section 16 Form 4 or Form 5 obligations may contir <i>See</i> Instruct 1(b).	r STATI										
(Print or Type Re	esponses)										
JOHNSON JULIA L Symbol			Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer				
PO BOX 14737 (Month/Da 08/15/20 (Street) 4. If Amen Filed(Mont			(Month/Da	Date of Earliest Transaction onth/Day/Year) /15/2018				(Check all applicable) <u>X</u> Director Officer (give title <u>10%</u> Owner below) <u>Director</u> Other (specify below)			
			ndment, Date Original th/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>				
TALLAHAS (City)	(State)	(Zip)	<b>7</b> . 1 1	IN D	• • •			Person			
1.Title of Security (Instr. 3)	2. Transaction I (Month/Day/Ye	Date 2A. Dee ear) Execution any		<ul> <li>I - Non-De</li> <li>3. Transactic Code (Instr. 8)</li> <li>Code V</li> </ul>	4. Securit mAcquired Disposed (Instr. 3,	ties (A) o of (D 4 and (A) or	r )	Beneficially	f, or Beneficial 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	-	
Common Stock	08/15/2018			А	1,261	А	\$0	59,498	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.

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

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	Securities Acquired (A) or Disposed of (D)		ate	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	(Instr. 3, 4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships						
	Director	10% Owner	Officer	Other			
JOHNSON JULIA L							
PO BOX 14737	Х						
TALLAHASSEE, FL 32317							
Signatures							
\s\ Albert de Cardenas For: Juli	ia						
Johnson	08/17/2018						
**Signature of Reporting Person		Da	te				

## **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).

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.