

[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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. Name and Address of Reporting Person * Ausher Jason R | | | | | | = - | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | |
|---|---|-------------------|----------------------------------|------------|---|--|------------------------------|-----------------------------------|---|---------------|--------------------|---|--|--|--|---|---|------------|
| | | | | | | | | | | | | | | | incubic) | | | |
| (Last) | (Last) (First) (Middle) | | | | 3. 1 | 3. Date of Earliest Transaction (MM/DD/YYYY) | | | | | | | Director 10% Owner X Officer (give title below) Other (specify below) | | | | | |
| 4221 WEST BOY SCOUT BOULEVARD | | | | | | 2/11/2022 | | | | | | | | Chief Accounting Officer | | | | |
| (Street) | | | | 4. 1 | 4. If Amendment, Date Original Filed (MM/DD/YYYY) | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | |
| TAMPA, FL 33607 (City) (State) (Zip) | | | | | | | | | | | | | | _X _ Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| | | | Table | I - No | on-Der | ivati | ive Secu | ırities Acc | quir | ed, Di | sposed o | f, or | Ben | neficially Owne | ed | | | |
| 1.Title of Security (Instr. 3) | | | 2. Tran | s. Date | Exect | | 3. Trans. Code (Instr. 8) | | 4. Securities Acqu or Disposed of (D) (Instr. 3, 4 and 5) | |) | F (I | (Instr. 3 and 4) Form Dire or In (I) (I) | | Ownership Form: Direct (D) or Indirect (I) (Instr. | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| Common Shares 2/11/ | | | | 2022 | 2 | | Code A | V | 3345 (| | Pric \$16.1 | _ | 43688 | | | 4) D | | |
| Common Shares 2/11/2 | | | | _ | | | F | | 1494 | _ | \$16.1 | | 42194 | | D | | | |
| | Tab | ole II - De | rivative | e Secu | ırities | Bene | eficially | Owned (| e.g., | puts, | calls, wa | rran | ıts, o | options, conver | tible secu | urities) | | |
| Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative | 3. Trans. Date | 3A. Dee Execution Date, if | on (Instr. | | ns. Code 5. Numb Derivati Acquire Dispose (Instr. 3, | | re Securities (A) or of (D) | Expiration Date Second | | | Secur | rities l ative | Underlying Security | ying Derivative | Securities Beneficially Owned | Ownership Form of Derivative Security: | Beneficial |
| | Security | | | | Code | v | (A) | (D) | Date Exer | e rcisable | Expiration Date | Title | Amo | ount or Number of res | | Following Reported Transaction(s) (Instr. 4) | Direct (D) or Indirect (I) (Instr. 4) | |

Explanation of Responses:

- (1) Represents performance-based RSUs granted to the Reporting Person on December 11, 2018, which vested on February 11, 2022 as a result of the achievement of the performance criteria.
- (2) Represents the number of common shares withheld to satisfy tax obligations due upon the vesting of the performance-based RSUs granted to the Reporting Person on December 11, 2018

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | | | |
|--|---------------|-----------|--------------------------|-------|--|--|--|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | | | | |
| Ausher Jason R 4221 WEST BOY SCOUT BOULEVARD TAMPA, FL 33607 | | | Chief Accounting Officer | | | | | | |

Signatures

/s/ Marni Morgan Poe, as Attorney-in-fact 2/15/2022

**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 control number.