FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHAN	IGES IN BENEFICIAL	OWNERSHIP

l	OMB APPRO	DVAL						
	OMB Number:	3235-0287						
l	Estimated average burden							
	hours per response:	0.5						

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

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

Name and Address of Reporting Person* SMITH BRUCE D															Check all ap Dire	plicable) ctor	g Person(s) to Issuer 10% Owner Other (specify below) COO and CFO	
(Last) (First) (Middle) 104 COLEMAN BLVD.						3. Date of Earliest Transaction (Month/Day/Year) 03/22/2017									^ belo	,		
(Street) SAVANN (City)			31408 Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								ine) X Fori Fori	-/			
		Tabl	e I - Nor	n-Deriv	ative	Sec	curitie	s Acc	quired,	Dis	posed o	f, or I	Bene	eficia	ally Own	ed		
				2. Transaction Date (Month/Day/Year)		ar) l	2A. Deemed Execution Date, if any (Month/Day/Year		Transaction Disposed Code (Instr. 5)		rities Acquired (A) ed Of (D) (Instr. 3, 4			nd Secur Benef	icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	ct of Indirect	
									Code	v	Amount	(A (C	() or ()	Price	Trans	action(s) 3 and 4)		(1130.4)
Common	Common Stock 03/22					/2017		A		7,500) A \$		\$	99,959		D		
		Та									sed of, onvertib				y Owned			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	Code (Instr.		n of		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 (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ect (Instr. 4)
	Code		v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amo or Num of Sha								

Explanation of Responses:

/s/ Henry H. Thompson, as attorney-in-fact

03/23/2017

** 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.