## Edgar Filing: Massey Richard N - Form 4

| Massey Rich<br>Form 4<br>August 28, 2   |  |             |   |            |                   |                  |  |   |                          |  |
|---|--|-------------|---|------------|-------------------|------------------|--|---|--------------------------|--|
| FORM  | <b>4</b> UNITED S  | TATES SECUI |   |            |                   | NGE C            | OMMISSION  | OMB   | PROVAL<br>3235-0287      |  |
| if no long<br>subject to<br>Section 1<br>Form 4 o<br>Form 5<br>obligation<br>may cont | obligations<br>may continue.<br>See InstructionSection 17(a) of the Public Utility Holding Company Act of 1935 or Section<br>30(h) of the Investment Company Act of 1940 |             |   |            |                   |                  | Kumber.January 31,Expires:2005Estimated averageburden hours perresponse0.5   |   |                          |  |
| (Print or Type F  | Responses)   |             |   |            |                   |                  |  |   |                          |  |
| Massey Richard N Symt   |  |             | lelity National Financial, Inc.           |            |                   |                  | 5. Relationship of Reporting Person(s) to<br>Issuer<br>(Check all applicable)  |   |                          |  |
| (Last) 601 RIVER  | (First) (Mi<br>SIDE AVENUE   |             | f Earliest Tr<br>Day/Year)<br>2009        | ransaction |                   |                  | X Director<br>Officer (give t<br>below)  |   | Owner<br>r (specify      |  |
| Filed(Mor   |  |             | nendment, Date Original<br>onth/Day/Year) |            |                   |                  | <ul> <li>6. Individual or Joint/Group Filing(Check<br/>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul> |   |                          |  |
|   | /ILLE, FL 32204  | <b>-</b>    |   |            |                   |                  | Person   |   |                          |  |
| (City)<br>1.Title of<br>Security<br>(Instr. 3)  | 2. Transaction Date<br>(Month/Day/Year)  |             | 3.  | Amount     | ies Aco<br>sposed | quired<br>of (D) | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 3 and 4)   | 6.<br>Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4) | 7. Nature of<br>Indirect |  |
| Common<br>Stock   | 08/27/2009   |             | P   | 50,000     | A                 | \$<br>15.14      | 78,879   | 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<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transactic<br>Code<br>(Instr. 8) | 5.<br>onNumber<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3,<br>4, and 5) |                     | ate                | 7. Titl<br>Amou<br>Under<br>Securi<br>(Instr. | int of<br>rlying                       | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secu<br>Bene<br>Owna<br>Follo<br>Repo<br>Trans<br>(Instr |
|---|---|---|---|--|---|---------------------|--------------------|---|--|---|--|
|   |   |   |   | Code V                                 | (A) (D)   | Date<br>Exercisable | Expiration<br>Date |   | Amount<br>or<br>Number<br>of<br>Shares |   |  |

## **Reporting Owners**

| <b>Reporting Owner Name / Addres</b>                               | S          | Relationships |         |       |  |  |  |  |
|--|------------|---------------|---------|-------|--|--|--|--|
|  | Director   | 10% Owner     | Officer | Other |  |  |  |  |
| Massey Richard N<br>601 RIVERSIDE AVENUE<br>JACKSONVILLE, FL 32204 | X          |               |         |       |  |  |  |  |
| Signatures   |            |               |         |       |  |  |  |  |
| Richard N.<br>Massey   | 08/28/2009 |               |         |       |  |  |  |  |
| <u>**</u> Signature of<br>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).

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.