

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

| 1. Title of Derivative (Instr. 3) | 2. Conversion Date (Instr. 3) | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | Code V Transaction Code (Instr. 8) | (A) Number of Derivative Securities Acquired | (D) Disposed of (Instr. 3, 4 and 5) | Date of Expiration (Month/Day/Year) | Title and Amount of Underlying Derivative Security (Instr. 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
|--|-------------------------------|--------------------------------------|--|------------------------------------|--|-------------------------------------|-------------------------------------|---|--|---|---|--|
| 1. The sales of Common Shares represented by this Form 4 were effected pursuant to a rule 10b5-1 trading plan adopted by the seller on June 13, 2007. | | | | | | | | | | | | |
| 2. Shares owned by Window to Wall Street, Inc. of which Mr. Page is President. Mr. Page disclaims any beneficial ownership of such securities to the extent of his following interest: | | | | | | | | | | | | |
| | | | | | | | | <u>Christopher Carmody, as Attorney in Fact for Louis Page</u> | | 06/29/2007 | | |
| | | | | | | | | | | ** 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. | | | | | | | | | | | | |