Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), and 6058(a) of the Internal Revenue Code (the Code).

▶ **Complete all entries in accordance with the instructions to the Form 5500.**

OMB Nos. 1210-0110
1210-0089

2009

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2009 or fiscal plan year beginning 01/01/2009 and ending 12/31/2009

A This return/report is for:
- [ ] a multiemployer plan;
- [ ] a multiple-employer plan; or
- [X] a single-employer plan;
- [ ] a DFE (specify) ____

B This return/report is:
- [ ] the first return/report;
- [ ] the final return/report;
- [ ] an amended return/report;
- [ ] a short plan year return/report (less than 12 months).

C If the plan is a collectively-bargained plan, check here. . . . . ▶ [ ]

D Check box if filing under:
- [X] Form 5558;
- [ ] automatic extension;
- [ ] the DFVC program;
- [ ] special extension (enter description)

Part II Basic Plan Information—enter all requested information

1a Name of plan
ROGERS TOWERS 401K PLAN

1b Three-digit plan number (PN) ▶ 004

1c Effective date of plan 01/01/1997

2a Plan sponsor's name and address (employer, if for a single-employer plan)
(Address should include room or suite no.)
ROGERS TOWERS

1301 RIVERPLACE BOULEVARD, STE 1500
JACKSONVILLE, FL 32207-9000

2b Employer Identification Number (EIN)
59-1638577

2c Sponsor's telephone number
904-398-3911

2d Business code (see instructions)
541110

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	09/22/2010	PAMELA BASS
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address (if same as plan sponsor, enter "Same")
ROGERS TOWERS

1301 RIVERPLACE BOULEVARD, STE 1500
JACKSONVILLE, FL 32207-9000

3b Administrator's EIN
59-1638577

3c Administrator's telephone number
904-398-3911

4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report:

a Sponsor's name

4b EIN

4c PN

5	Total number of participants at the beginning of the plan year	**5**	236
6	Number of participants as of the end of the plan year (welfare plans complete only lines **6a, 6b, 6c,** and **6d**).		
a	Active participants	**6a**	160
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	65
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	225
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	0
f	Total. Add lines **6d** and **6e**	**6f**	225
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	225
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	12
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:
2A 2E 2F 2G 2J 2K

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristic Codes in the instructions:

9a Plan funding arrangement (check all that apply)

(1)		Insurance
(2)		Code section 412(e)(3) insurance contracts
(3)	X	Trust
(4)		General assets of the sponsor

9b Plan benefit arrangement (check all that apply)

(1)		Insurance
(2)		Code section 412(e)(3) insurance contracts
(3)	X	Trust
(4)		General assets of the sponsor

10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules

(1)	X	**R** (Retirement Plan Information)
(2)		**MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
(3)		**SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary

b General Schedules

(1)	X		**H** (Financial Information)
(2)			**I** (Financial Information – Small Plan)
(3)		0	**A** (Insurance Information)
(4)			**C** (Service Provider Information)
(5)	X		**D** (DFE/Participating Plan Information)
(6)			**G** (Financial Transaction Schedules)

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2009

This Form is Open to Public Inspection.

For calendar plan year 2009 or fiscal plan year beginning 01/01/2009 and ending 12/31/2009

A Name of plan
ROGERS TOWERS 401K PLAN

B Three-digit plan number (PN) ▶ 004

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
ROGERS TOWERS

D Employer Identification Number (EIN)
59-1638577

Part I **Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)**
(Complete as many entries as needed to report all interests in DFEs)

a Name of MTIA, CCT, PSA, or 103-12 IE: STABLE INVESTMENT FUND

b Name of sponsor of entity listed in (a): WACHOVIA BANK, N.A.

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
56-6271988-001	C	4114497

a Name of MTIA, CCT, PSA, or 103-12 IE: ENHANCED STOCK MARKET

b Name of sponsor of entity listed in (a): WACHOVIA BANK, N.A.

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
56-6288528-001	C	600671

a Name of MTIA, CCT, PSA, or 103-12 IE: DIVERSIFIED BOND GROUP TRUST

b Name of sponsor of entity listed in (a): WACHOVIA BANK, N.A.

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
54-6113592-001	C	16814

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

Part II Information on Participating Plans (to be completed by DFEs)

(Complete as many entries as needed to report all participating plans)

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

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b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2009

This Form is Open to Public Inspection

For calendar plan year 2009 or fiscal plan year beginning 01/01/2009 and ending 12/31/2009

A Name of plan
ROGERS TOWERS 401K PLAN

B Three-digit plan number (PN) ▶ 004

C Plan sponsor's name as shown on line 2a of Form 5500
ROGERS TOWERS

D Employer Identification Number (EIN)
59-1638577

Part I Asset and Liability Statement

1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	1697071	1171394
(2) Participant contributions	1b(2)	227307	189562
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	197877	269265
(9) Value of interest in common/collective trusts	1c(9)	3746229	4756414
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	7959024	11963009
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

			(a) Beginning of Year	(b) End of Year
1d	Employer-related investments:			
	(1) Employer securities	1d(1)		
	(2) Employer real property	1d(2)		
e	Buildings and other property used in plan operation	1e		
f	Total assets (add all amounts in lines 1a through 1e)	1f	13827508	18349644
	Liabilities			
g	Benefit claims payable	1g		
h	Operating payables	1h		
i	Acquisition indebtedness	1i		
j	Other liabilities	1j		
k	Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	13827508	18349644

Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

	Income		(a) Amount	(b) Total
a	**Contributions:**			
	(1) Received or receivable in cash from: **(A)** Employers	2a(1)(A)	1297597	
	(B) Participants	2a(1)(B)	1190578	
	(C) Others (including rollovers)	2a(1)(C)	11437	
	(2) Noncash contributions	2a(2)		
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		2499612
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
	(B) U.S. Government securities	2b(1)(B)		
	(C) Corporate debt instruments	2b(1)(C)		
	(D) Loans (other than to participants)	2b(1)(D)		
	(E) Participant loans	2b(1)(E)	10337	
	(F) Other	2b(1)(F)		
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		10337
	(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
	(B) Common stock	2b(2)(B)		
	(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	201051	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		201051
	(3) Rents	2b(3)		
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	3317766	
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)	3193011	
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		124755

		(a) Amount	(b) Total
2b (5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		0
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		2249232
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		5084987
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	510987	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		510987
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)	51864	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		51864
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		562851
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		4522136
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) [ ] Unqualified (2) [ ] Qualified (3) [X] Disclaimer (4) [ ] Adverse

b Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103-8 and/or 103-12(d)? [X] Yes [ ] No

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: LBA CERTIFIED PUBLIC ACCOUNTANTS (2) EIN: 59-1302284

d The opinion of an independent qualified public accountant is **not attached** because:

(1) [ ] This form is filed for a CCT, PSA, or MTIA. (2) [ ] It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete 4j and 4l. MTIAs also do not complete 4l.

During the plan year:

		Yes	No	Amount
a	Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	4a	X		41120
b	Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	4b		X	
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X	
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	4d		X	
e	Was this plan covered by a fidelity bond?	4e		X	
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l	Has the plan failed to provide any benefit when due under the plan?	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? If yes, enter the amount of any plan assets that reverted to the employer this year ☐ **Yes** ☒ **No** **Amount:**

5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

This schedule is required to be filed under section 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2009

This Form is Open to Public Inspection.

For calendar plan year 2009 or fiscal plan year beginning 01/01/2009 and ending 12/31/2009

A Name of plan
ROGERS TOWERS 401K PLAN

B Three-digit plan number (PN) ▶ 004

C Plan sponsor's name as shown on line 2a of Form 5500
ROGERS TOWERS

D Employer Identification Number (EIN)
59-1638577

Part I Distributions

All references to distributions relate only to payments of benefits during the plan year.

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions **1** 0

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):

EIN(s): 56-2039610

Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.

3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year. **3**

Part II Funding Information (If the plan is not subject to the minimum funding requirements of section of 412 of the Internal Revenue Code or ERISA section 302, skip this Part)

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____

If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

6 **a** Enter the minimum required contribution for this plan year **6a**

b Enter the amount contributed by the employer to the plan for this plan year **6b**

c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount) **6c**

If you completed line 6c, skip lines 8 and 9.

7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

Part III Amendments

9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box(es). If no, check the "No" box. ..... ☐ **Increase** ☐ **Decrease** ☐ **Both** ☐ **No**

Part IV ESOPs (see instructions). If this is not a plan described under Section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ..... ☐ **Yes** ☐ **No**

11 **a** Does the ESOP hold any preferred stock? ..... ☐ **Yes** ☐ **No**

b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ..... ☐ **Yes** ☐ **No**

12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ..... ☐ **Yes** ☐ **No**

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that contributed more than 5% of total contributions to the plan during the plan year (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

14 Enter the number of participants on whose behalf no contributions were made by an employer as an employer of the participant for:

a The current year	**14a**	
b The plan year immediately preceding the current plan year	**14b**	
c The second preceding plan year	**14c**	

15 Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year	**15a**	
b The corresponding number for the second preceding plan year	**15b**	

16 Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year	**16a**	
b If item 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	**16b**	

17 If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment. ☐

Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans

18 If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐

19 If the total number of participants is 1,000 or more, complete items (a) through (c)

a Enter the percentage of plan assets held as:
Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

b Provide the average duration of the combined investment-grade and high-yield debt:
☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

c What duration measure was used to calculate item 19(b)?
☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify):

ROGERS TOWERS 401(k) PLAN

FINANCIAL REPORT

DECEMBER 31, 2009 AND 2008

ROGERS TOWERS 401(k) PLAN

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LBA CERTIFIED PUBLIC ACCOUNTANTS, PA

Report of Independent Certified Public Accountants

To the Trustees of
Rogers Towers 401(k) Plan
Jacksonville, Florida

We were engaged to audit the accompanying statements of net assets available for benefits of Rogers Towers 401(k) Plan (the "Plan") as of December 31, 2009 and 2008, and the related statement of changes in net assets available for benefits for the year ended December 31, 2009, and the schedules of Schedule H, Line 4i – Schedule of assets (held at end of year), and Schedule H, Line 4a - Schedule of delinquent participant contributions as of December 31, 2009. These financial statements and supplemental schedules are the responsibility of the Plan's management.

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Notes 3 and 5, which was certified or provided by Wells Fargo Bank, N.A., the custodian of the Plan, except for comparing the information with the related information included in the financial statements and supplemental schedule of assets (held at end of year). We have been informed by the plan administrator that the custodian holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the custodian as of December 31, 2009 and 2008, and for the year ended December 31, 2009, that the information provided to the plan administrator by the custodian is complete and accurate.

Because of the significance of the information that we did not audit, we are unable to, and do not, express an opinion on the accompanying financial statements and supplemental schedules taken as a whole. The form and content of the information included in the financial statements and supplemental schedules, other than that derived from the information certified or provided by the custodian, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

LBA Certified Public Accountants, P.A.

September 16, 2010

ROGERS TOWERS 401(k) PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2009 AND 2008

	2009	2008
Assets:		
Investments, at fair value	**$ 16,904,716**	$ 11,706,306
Receivables:		
Company contributions	**1,171,394**	1,697,071
Participant contributions	**189,562**	227,307
Total receivables	**1,360,956**	1,924,378
Net assets available for benefits at fair value	**18,265,672**	13,630,684
Adjustment from fair value to contract value for fully benefit-responsive investment contracts	**83,972**	196,824
Net assets available for benefits	**$ 18,349,644**	$ 13,827,508

See accompanying notes to financial statements and report of independent certified public accountants.

ROGERS TOWERS 401(k) PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
YEAR ENDED DECEMBER 31, 2009

Additions to net assets attributed to:	
Investment income:	
Net appreciation in fair value of investments	$ 2,373,988
Dividends	201,036
Interest on loans to participants	10,403
Total investment income	2,585,427
Contributions:	
Company	1,297,611
Participant	1,202,015
Total contributions	2,499,626
Total additions	5,085,053
Deductions from net assets attributed to:	
Benefits paid to participants	511,053
Administrative expenses	51,864
Total deductions	562,917
Net increase	4,522,136
Net assets available for benefits	
December 31, 2008	13,827,508
December 31, 2009	$ 18,349,644

See accompanying notes to financial statements and report of independent certified public accountants.

1. Description of Plan

The following description of the Rogers Towers 401(k) Plan (the "Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan covering all employees of Rogers Towers, P.A. (the "Company") who have completed six months of service and are at least 20 years of age. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

Effective December 31, 2008, Wachovia Bank, the custodian of the Plan, was acquired by Wells Fargo Bank, N.A ("Wells Fargo"). Due to the change in ownership, Wells Fargo is referred to as the custodian in the financial statements.

Contributions

Each year, the Company will remit contributions to the Plan in the following amounts:

(a) The total amount of participant's elective deferrals including pre-tax and Roth contributions up to a maximum permitted by the Internal Revenue Code. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing rollover distributions from other qualified defined benefits or defined contributions plans.

(b) A matching contribution equal to 25% of the salary deferred by the participants, not to exceed 6% of the participant's salary.

(c) A discretionary contribution on behalf of each non-highly compensated participant and non-key employee equal to a uniform percentage of participants' compensation, to be determined each year by the Company.

(d) A discretionary profit sharing contribution determined each year by the Company. The Company elected to make a profit sharing contribution of $1,096,692 for 2009.

Participant Accounts

Each participant's account is credited with the participant's elective contributions, and allocations of (a) the Company's nondiscretionary match, (b) the Company's discretionary contributions (based on eligibility) and, (c) Plan earnings, and charged with an allocation of administrative expenses. Allocations are based on participant earnings or account balances, as defined. All contributions to the Plan are participant-directed. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

1. **Description of Plan** (Continued)

Vesting

Participants are immediately vested in their contributions and the Company matching contributions plus actual earnings thereon. Vesting in the Company discretionary profit sharing contributions and related earnings is based on years of continuous service. Participants vest 20% per year beginning with the second year, and are fully vested after six years of credited service.

Participant Loans

Participants may borrow from their fund accounts a minimum of $1,000 up to a maximum of $50,000 or 50% of their vested account balance, whichever is less. Loan repayment periods generally do not exceed five years. The loans are secured by the vested balance in the participant's account and bear interest at market rates. Principal and interest are paid through payroll deduction.

Payment of Benefits

On termination of services for any reason, a participant (or beneficiary) may elect to receive either a lump sum amount equal to the value of the participant's vested interest in his or her account, or annual installments.

Forfeitures

Forfeited amounts are used to reinstate previously forfeited account balances of former participants, if any, and other required contributions of the Company. Any remaining forfeitures may be used to pay the administration expenses of the Plan. If any remain after payment of expenses, they shall be allocated to the participant accounts in the same manner as any discretionary Company contribution. At December 31, 2009 and 2008, forfeited non-vested amounts totaled $16,313 and $16,918, respectively. During 2009, $16,979 was used to reduce the Company's 2008 discretionary contribution made in January 2009.

2. **Summary of Significant Accounting Policies**

This summary of significant accounting policies of the Plan is presented to assist in understanding the financial statements. The financial statements and accompanying notes are representations of the Plan's management. These accounting policies conform to accounting principles generally accepted in the United States of America ("GAAP") and have been consistently applied in the presentation of the financial statements.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosure of contingent assets and liabilities. Actual results may differ from those estimates.

2. **Summary of Significant Accounting Policies** (Continued)

Basis of Accounting

The financial statements of the Plan are prepared on the accrual basis of accounting.

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 5 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Guaranteed Investment Contracts

Investment contracts held by a defined contribution plan are required to be reported at fair value. However, contract value is the relevant measurement attribute for that portion of the net assets available for benefits of a defined contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the Plan. The statements of net assets available for benefits present the fair value of the investment contracts as well as the adjustment of the fully benefit-responsive investment contracts from fair value to contract value. The statement of changes in net assets available for benefits is prepared on a contract value basis.

Administrative Expenses

The Plan pays trustee and asset management fees; legal, accounting and other services may be paid by the Company or the Plan.

Payment of Benefits

Benefits are recorded when paid.

Subsequent Events

The Plan has evaluated subsequent events through the date of the report of the independent certified public accountants, the date the financial statements were available to be issued.

3. **Information Certified by the Plan's Custodian**

The investments included in the statements of net assets available for benefits at December 31, 2009 and 2008, and the investment income included in the statement of changes in net assets available for benefits for the year ended December 31, 2009, as well as the information in Note 4, and the supplemental schedule of assets (held at end of year) have been derived from information certified as

3. Information Certified by the Plan's Custodian (Continued)

complete and accurate by Wells Fargo, the custodian of the Plan, in accordance with Section 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

4. Investments

The following table presents individual investments that represent 5% or more of the Plan's net assets at December 31:

	2009	2008
Common/collective trust:		
Wachovia Stable Investment Fund **	$ 4,127,643	$ 3,208,225
Mutual funds:		
PIMCO Total Return Fund	1,883,770	1,260,760
American Capital World Growth & Income Fund	1,491,636	1,005,918
Vanguard Windsor II Fund	1,460,714	1,185,903
American - The Growth Fund of America	1,175,919	769,136

** Contract value

During 2009, the Plan had net appreciation (including gains and losses on investments bought and sold as well as held during the year) in the fair value of its investments as follows:

Mutual funds	$ 2,125,049
Common/collective trusts	248,939
	$ 2,373,988

5. Fair Value Measurements

Authoritative guidance provides the framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under authoritative guidance are described as follows:

Level 1 Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level 2 Inputs to the valuation methodology include: quoted prices for similar assets or liabilities in active markets; quoted prices for identical or similar assets or liabilities in inactive markets; inputs other than quoted prices that are observable for the asset or liability; inputs that are derived principally from or corroborated by observable market data by correlation or other means.

5. Fair Value Measurements (Continued)

If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

Level 3 Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The asset's or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

There have been no changes in the methodologies used at December 31, 2009 and 2008. Following is a description of the valuation methodologies used for assets measured at fair value:

Mutual funds: Valued at the net asset value of shares held by the Plan at year end.

Common/collective trusts: Valued at the unit price provided by Wells Fargo. The unit price is quoted on a private market that is not active; however, the unit price is based on underlying investments which are traded on an active market.

Participant loans: Valued at amortized cost, which approximates fair value.

The preceding methods described may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

Effective for 2009, the Plan adopted authoritative guidance that expands the disclosures, and requires that the major category for debt and equity securities in the fair value hierarchy table below be determined on the basis of the nature and risks of the investment. The guidance is to be applied prospectively. The table is presented using the same descriptions of the nature and risk of the investments that the custodian provides to the participants.

5. **Fair Value Measurements** (Continued)

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value at December 31, 2009:

	Level 1	Level 2	Level 3	Total
Mutual funds:				
Equity	$ 5,805,302	$ -	$ -	$ 5,805,302
International equity	2,843,651	-	-	2,843,651
Fixed income	643,465	-	-	643,465
Other	39,318	-	-	39,318
Balanced	769,940	-	-	769,940
Bonds	1,861,333	-	-	1,871,333
Total mutual funds	11,963,009	-	-	11,963,009
Common/collective trusts:				
Balanced	-	-	4,060,485	4,060,485
Equity		611,957	-	611,957
Total common/collective trusts	-	611,957	4,060,485	4,672,442
Participant loans	-	-	269,265	269,265
Total assets at fair value	$ 11,963,009	$ 611,957	$ 4,329,750	$16,904,716

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value at December 31, 2008:

	Level 1	Level 2	Level 3	Total
Mutual funds	$ 7,959,024	$ -	$ -	$ 7,959,024
Common/collective trusts	-	520,750	3,028,655	3,549,405
Participant loans	-	-	197,877	197,877
Total assets at fair value	$ 7,959,024	$ 520,750	$ 3,226,532	$ 11,706,306

The following table presents the changes in Level 3 investments measured on a recurring basis for the year ended December 31, 2009:

Balance, beginning of year	$ 3,226,532
Realized gains	40,620
Unrealized gains relating to instruments still held at the reporting date	189,505
Purchases, sales, issuances and settlements, net	873,093
Balance, end of year	$ 4,329,750

6. Investment Contract with Insurance Companies

The Plan has assets invested in the Wachovia Stable Investment Fund (the "Fund"), a common/collective trust fund. The Fund holds investments in two types of guaranteed investment contracts ("GICs"): traditional and synthetic.

Traditional GICs are investment contracts issued by an insurance company or other financial institution backed by the general account of the issuer. The Fund deposits a lump sum with the issuer and receives a guaranteed interest rate for a specified time. Interest is accrued on either a simple interest or fully compounded basis and paid either periodically or at the end of the contract term. The GICs provide a fixed or floating rate of interest over the term to maturity of the contract. The issuer guarantees that all qualified participant withdrawals will occur at contract value.

Synthetic GICs, also known as a wrap contract, are investment contracts issued by an insurance company or other financial institution, backed by a portfolio of bonds or other fixed income securities that are owned by the issuer. The assets underlying the contract are maintained separate from the issuer's general assets, usually by a third party custodian. The contract provides an interest rate not less than zero. Such contracts typically provide that realized and unrealized gains and losses on the underlying assets are not reflected immediately in the value of the contract, but rather amortized, usually over the time to maturity or the duration of the underlying investments, through adjustments to the future interest crediting rate.

The underlying assets of the Fund are invested in several fully benefit-responsive guaranteed interest accounts with various insurance companies. Wells Fargo maintains the contributions in a general account, which is credited with earnings on the underlying investments and charged for participant withdrawals and administrative expenses. The investment is reported at fair value on the statements of net assets available for benefits as described in Note 2, but is reported to the Plan at contract value by Wells Fargo. Contract value represents contributions made under contract, plus earnings, less participant withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value without penalty. The contract has certain restrictions that impact the ability to collect the full contract value for non-benefit responsive events. Plan management believes that the occurrence of events that would cause the plan to transact at less than contract value is not probable. Wells Fargo may not terminate the contract at any amount less than contract value.

7. Plan Termination

Although it has not expressed intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of plan termination, participants will become 100 percent vested in their Company contributions.

8. Tax Status

The Internal Revenue Service has informed the Company by letter dated January 21, 1998, that the Plan adopted by the Company, as then designed, was in accordance with applicable sections of the Internal Revenue Code. Although the Plan has been amended since receiving the opinion letter, the Plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the Internal Revenue Code. Therefore, no provision for income taxes has been included in the Plan's financial statements.

9. Risks and Uncertainties

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the value of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statements of net assets available for plan benefits.

10. Related Party Transactions

Certain Plan investments are managed by Wells Fargo. Wells Fargo is the custodian as defined by the Plan and, therefore, these transactions qualify as party-in-interest transactions. Fees paid by the Plan for the investment management services amounted to $51,864 for the year ended December 31, 2009.

SUPPLEMENTAL SCHEDULES

ROGERS TOWERS 401(k) PLAN
59-1638577 PLAN #004
SCHEDULE H - LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2009

(a)	(b) IDENTITY OF ISSUE, BORROWER, LESSOR, OR SIMILAR PARTY	(c) DESCRIPTION OF INVESTMENT ASSET	MATURITY DATE	RATE OF INTEREST	COLLAT-ERAL	PAR OR MATURITY VALUE	(d) COST	(e) CURRENT VALUE
*	Wachovia Stable Investment Fund **	Common/Collective Trust	-	-	-	-	-	$ 4,127,643
	Vanguard Intermediate Term Treasury Fund	Mutual Fund	-	-	-	-	-	619,959
	Evergreen Int'l Bond Fund	Mutual Fund	-	-	-	-	-	9,425
	PIMCO Real Return Fund	Mutual Fund	-	-	-	-	-	8,285
	JP Morgan High Yield Fund	Mutual Fund	-	-	-	-	-	5,796
*	Wachovia Enhanced Stock Market Fund	Common/Collective Trust	-	-	-	-	-	611,957
	Allianz CCM Capital Appreciation Fund	Mutual Fund	-	-	-	-	-	422,348
	American Century Vista Fund	Mutual Fund	-	-	-	-	-	483,562
	Goldman Sachs Mid Cap Value Fund	Mutual Fund	-	-	-	-	-	173,006
	American - The Growth Fund of America	Mutual Fund	-	-	-	-	-	1,175,919

ROGERS TOWERS 401(k) PLAN
59-1638577 PLAN #004
SCHEDULE H - LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2009

(a)	(b) IDENTITY OF ISSUE, BORROWER, LESSOR, OR SIMILAR PARTY	(c) DESCRIPTION OF INVESTMENT ASSET	MATURITY DATE	RATE OF INTEREST	COLLAT-ERAL	PAR OR MATURITY VALUE	(d) COST	(e) CURRENT VALUE
	Lord Abbett Research - Small Cap Value Fund	Mutual Fund	-	-	-	-	-	$ 647,345
	MFS Value Fund	Mutual Fund	-	-	-	-	-	679,118
	T. Rowe Price Real Estate Advisor Fund	Mutual Fund	-	-	-	-	-	68,985
	T. Rowe Price Real Estate Fund	Mutual Fund	-	-	-	-	-	10,677
	Vanguard Windsor II Fund	Mutual Fund	-	-	-	-	-	1,460,714
	Vanguard Small-Cap Index Fund	Mutual Fund	-	-	-	-	-	322,714
	Evergreen Select Strg Growth Fund	Mutual Fund	-	-	-	-	-	17,721
	T. Rowe Price Equity Income Fund	Mutual Fund	-	-	-	-	-	23,753
	Alger Small Cap Growth Fund	Mutual Fund	-	-	-	-	-	6,921
	Goldman Sachs Large Value Fund	Mutual Fund	-	-	-	-	-	26,991
	T. Rowe Price Growth Fund	Mutual Fund	-	-	-	-	-	23,208
	Dreyfus Pemier Small Cap Equity Fund	Mutual Fund	-	-	-	-	-	9,302

ROGERS TOWERS 401(k) PLAN
59-1638577 PLAN #004
SCHEDULE H - LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2009

(a)	(b) IDENTITY OF ISSUE, BORROWER, LESSOR, OR SIMILAR PARTY	(c) DESCRIPTION OF INVESTMENT ASSET	MATURITY DATE	RATE OF INTEREST	COLLAT-ERAL	PAR OR MATURITY VALUE	(d) COST	(e) CURRENT VALUE
	American Capital World Growth & Income Fund	Mutual Fund	-	-	-	-	-	$ 1,491,636
	Evergreen Intl Equity Fund	Mutual Fund	-	-	-	-	-	746,764
	Lazard Emerging Markets Portfolio Retail Fund	Mutual Fund	-	-	-	-	-	596,965
	Lazard Emerging Markets Institutional Fund	Mutual Fund	-	-	-	-	-	8,286
	Vanguard Dividend Growth Fund	Mutual Fund	-	-	-	-	-	263,695
*	Wachovia Total Return Bond Fund	Common/Collective Trust	-	-	-	-	-	16,814
	PIMCO Total Return Fund	Mutual Fund	-	-	-	-	-	1,883,770
	PIMCO High Yield Fund	Mutual Fund	-	-	-	-	-	6,204
	Oakmark Equity & Income Fund	Mutual Fund	-	-	-	-	-	769,940
*	Participant Loans	Participant Loans	Various	4.25% to 9.25%	Participant Accounts	-	-	269,265

* Party-in-interest as defined by ERISA
** Contract value

ROGERS TOWERS 401(k) PLAN

59-1638577 PLAN #004

SCHEDULE H, LINE 4a – SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS

DECEMBER 31, 2009

PARTICIPANT CONTRIBUTIONS TRANSFERRED LATE TO PLAN	TOTAL THAT CONSTITUTES NONEXEMPT PROHIBITED TRANSACTIONS			
CHECK HERE IF LATE PARTICIPANT LOAN REPAYMENTS ARE INCLUDED: ☐	CONTRIBUTIONS NOT CORRECTED	CONTRIBUTIONS CORRECTED OUTSIDE VFCP	CONTRIBUTIONS PENDING CORRECTION IN VFCP	TOTAL FULLY CORRECTED UNDER VFCP AND PTE 2002-51
$41,120	$ -	$41,120	$ -	$ -

Rogers Towers 401(k) Plan	Three Digit Plan Number	004
Rogers Towers	Employer Identification Number 59-1638577	

Schedule H, line 4i-Schedule of Assets (Held at End of Year)

12/31/2009

(a) (b) Identity of issue, borrower, (c) Description of investment including maturity date, rate of interest, collateral, par or maturity value (d) Cost (e) Current Value

*	Wachovia Bank	Description of Investment	Cost**	Current Value
*	Wachovia Bank	Stable Investment Fund of Wachovia A		4114497
*	Wachovia Bank	MFS Value FD CL A		679118
*	Wachovia Bank	Vanguard Windsor II FD INV CL		1460714
*	Wachovia Bank	Enhanced Stock Market Fund FOR of Wachovia A		600671
*	Wachovia Bank	Evergreen International Equity FD CL I		715799
*	Wachovia Bank	Vanguard Small-Cap Index FD INV CL		322714
*	Wachovia Bank	Evergreen Select STG GR I For Advice Track		17721
*	Wachovia Bank	Enhanced Stock Market Fund FOR Advice Track		11285
*	Wachovia Bank	Pimco Total Return		28640
*	Wachovia Bank	Evergreen Int'l Bond CL I for Advice Track		9425
*	Wachovia Bank	Lazard Emerging Markets Inst		8286
*	Wachovia Bank	Diversified Bond Group TR for Advice Track		16814
*	Wachovia Bank	Evergreen International Equity for Advice Track		30965
*	Wachovia Bank	Stable Investment FD for Advice Track		13147
*	Wachovia Bank	PIMCO High Yield Fund for Advice Track		6204
*	Wachovia Bank	T Rowe Price and Equity Income		23753
*	Wachovia Bank	Alger Small Cap Growth		6921
*	Wachovia Bank	Allianz CCM Capital Appreciation fund ADM CL		422348
*	Wachovia Bank	Lord Abbett Research-Small Cap Value Series CL A		647344
*	Wachovia Bank	Pimco Real Return Fund Inst		8285
*	Wachovia Bank	T Rowe Price Real Estate		10678
*	Wachovia Bank	Goldman Sachs midcap val/a		173005
*	Wachovia Bank	Lazard Emerging Markets open		596965
*	Wachovia Bank	Trowe Price Real Estate Adv		68985
*	Wachovia Bank	Goldman Sachs large cap val/ I AT		26991
*	Wachovia Bank	JP Morgan High Yield AT		5796
*	Wachovia Bank	Trowe Price Growth Stock - AT		23209
*	Wachovia Bank	Dreyfus Premier Sm Cap Equity		9302
*	Wachovia Bank	Pimco Total Return/ADM		1855130
*	Wachovia Bank	Vanguard Interm-Term Treas Inv		619959
*	Wachovia Bank	Oakmark Equity & Inc		769940
*	Wachovia Bank	American Funds Growth R4		1175919
*	Wachovia Bank	Amer Cent Vista		483562
*	Wachovia Bank	American Funds CapWGI R4		1491636
*	Wachovia Bank	Vanguard Dividend Growth		263695
	Loan Fund	5.25 %-9.25% Participant Accounts		269265

** Not applicable, self directed accounts