## FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| C. 20549 |
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| STATEMENT | OF CHANG | GES IN BEN | NEFICIAL ( | OWNERSHIP |
|-----------|----------|------------|------------|-----------|
|           |          |            |            |           |

| OMB APPRO              | VAL                                   |
|------------------------|---------------------------------------|
| OMB Number:            | 3235-0287                             |
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|                        | OMB Number:<br>Estimated average burd |

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* <u>HOLADAY G STEPHEN</u> |   |               |  |                                      |   |   |  |                          |                  |        |  |                       |   |  | eck all ap<br>Dire  | ctor     |  | 10%  | Owner                              |              |
|---|---|---------------|--|--------------------------------------|---|---|--|--------------------------|------------------|--------|--|-----------------------|---|--|---|----------|--|--|------------------------------------|--------------|
| (Last)<br>822 BISH  |   | First)<br>EET | (  | Middle)                              |   | 3. Date of Earliest Transaction (Month/Day/Year) 02/25/2007 |  |                          |                  |        |  |                       |   |  |   | belo     | Officer (give title X Other (speci below)  General Manager of major div. |  |                                    |              |
| (Street) HONOLU   |   | HI<br>State)  |  | 96813<br>Zip)                        |   | 4. If   | 4. If Amendment, Date of Original Filed (Month/Day/Year) |                          |                  |        |  |                       |   | Lin  | Individual or Joint/Group Filing (Check Applicable te)  X Form filed by One Reporting Person Form filed by More than One Reporting Person |          |  |  |                                    |              |
|   |   |               | Tabl                                       | e I - No                             | n-Deriv   | ative   | Sec  | curitie                  | s Ac             | quired | l, Dis   | sposed o              | f, or I   | 3ene   | ficial  | ly Own   | ed   |  |                                    |              |
| 1. Title of Security (Instr. 3)                                   |   |               | 2. Transaction<br>Date<br>(Month/Day/Year) |                                      | zA. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) |   | 3.<br>Transaction<br>Code (Instr.<br>8)                  |                          |                  |        |  |                       | 5. Amo<br>Securit<br>Benefic<br>Owned<br>Report | ies<br>cially<br>Following                         | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4)   |          | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4)        |  |                                    |              |
|   |   |               |  |                                      |   |   |  |                          | Code             | v      | Amount   | (A) (D)               | or F  | Price  | Transa<br>(Instr. 3   | ction(s) |  |  | (11150.4)                          |              |
| Common  | Common Stock <sup>(1)</sup> 02/25   |               |  |                                      | 02/25/  | 2007  |  |                          | F                |        | 161  | D                     | 2)  | \$51.1   | 66  | 66,621   |  | I  | By<br>Revocable<br>Living<br>Trust |              |
| Common Stock  |   |               |  |                                      |   |   |  |                          |                  |        |  |                       |   |  |   | 3        | 99.6   |  | I                                  | By<br>TCESOP |
|   |   |               | Та   | ıble II -                            |   |   |  |                          |                  |        |  | osed of,<br>convertib |   |  |   | Owned    |  |  |                                    |              |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)               | Derivative Conversion Date Execution Da<br>Security or Exercise (Month/Day/Year) if any |               | on Date,                                   | 4.<br>Transaction<br>Code (Instr. 8) |   |   |  | 6. Date Expirati (Month/ | ion Da<br>/Day/Y |        | Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Instrand 4) |                       | ount  | b. Price of<br>Derivative<br>Security<br>Instr. 5) | 9. Number<br>derivative<br>Securities<br>Beneficiall<br>Owned<br>Following<br>Reported<br>Transactio<br>(Instr. 4)                        | ly       | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |                                    |              |

## **Explanation of Responses:**

1. On June 25, 1998, the Board of Directors of the Company declared a dividend, with respect to each share of common stock, of Common Stock Purchase Rights (the 'Rights') pursuant to a Rights Agreement, dated as of June 25, 1998. The Rights are currently attached to, represented by, and transferable with, certificates representing outstanding shares of common stock.

2. Represents common stock withheld by the issuer to cover tax withholding obligations arising from the vesting of a previous grant of restricted shares.

## Remarks:

/s/ Holaday, G. Stephen 02/26/2007

\*\* 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.