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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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OMB	3235-
Number:	0287
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burden hours pe	er
response	0.5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type Resp	onses)		•								
1. Name and Addre Griffin Jon Kevi	2. Issuer I Symbol Main Stre					Is N	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last) 1300 POST OA	3. Date of I (Month/Da 07/16/201	y/Year)	rans	action		be	Officer (give title clow)	Other (s	specify below)		
HOUSTON, TX		4. If Amen Filed(Month		ate (Original		Aj	5. Individual or Joint/Group Filing(Check Applicable Line) .X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	p)	Table I	- Non-D	eriv	ative Sec	uritie	es Acquire	red, Disposed of, or Beneficially Owned			
		any	eemed on Date, if h/Day/Year)	Code		(A) or D	4. Securities Acquired (A) or Disposed of (D (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following	Ownership of Inc Form: Bene	 Nature of Indirect Beneficial Ownership
				Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock	07/15/2012			P <mark>(1)</mark>	v	18.606 A \$ 23.636		\$ 23.6365	4,901.545	D	
Common Stock	08/15/2012			P <u>(1)</u>	v	16.232	А	\$ 27.26	4,917.777	D	
Common Stock	09/14/2012			P <u>(1)</u>	V	15.696	А	\$28.34	4,933.473	D	

Reminder: Report on a separate line for each class of securities beneficially owned

directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02) required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

	(<i>e.g.</i> , puts, calls, warrants, options, convertible securities)														
1. Title of	2.	3. Transaction	3A. Deemed	4.	5			6. Date Exer	rcisable	7. Tit	tle and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transactio	on N	Jumb	ber	and Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	0	f		(Month/Day	/Year)	Unde	erlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	D	Deriva	ative			Secu	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				S	ecuri	ities			(Inst	r. 3 and		Owned	Security:	(Instr. 4)
	Security				A	Acqui	ired			4)			0	Direct (D)	
					`	A) or							- T	or Indirect	
						Dispo							Transaction(s)	× /	
						f(D)							(Instr. 4)	(Instr. 4)	
						Instr.									
				-	4	, and	l 5)								
											Amount				
								Date	Expiration		or				
								Exercisable	*	Title	Number				
								Excicisable	Date		of				
				Code	V ((A)	(D)				Shares				

Reporting Owners

Demonting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Griffin Jon Kevin 1300 POST OAK BLVD. STE. 800 HOUSTON, TX 77056	Х						

Signatures

/s/ Rodger A. Stout as Attorney-in-Fact for Jon Kevin Griffin	10/11/2012
Signature of 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).
- (1) The reporting person acquired these shares under a dividend reinvestment plan, pursuant to a dividend reinvestment transaction exempt from Section 16 under Rule 16a-11.

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.