Edgar Filing: Lamb Jeffrey D. - Form 4

| Form 4 April 15, 20 | • | | | | | | | | | |
|---|---|--|---|--------------------------|---|---|--|---|---|--|
| FORM | | | | | | | | OMB A | PPROVAL | |
| | UNITED | STATES | | | | | COMMISSION | OMB Number: | 3235-0287 | |
| Check th if no long subject to Section 1 Form 4 c | ger STATEN 16. | Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL SECURITIES | | | | | | Expires: Estimated burden ho response. | urs per | |
| Form 5 obligatio may con <i>See</i> Instr 1(b). | tinue. Section 17 | (a) of the P | ublic U | Jtility Hold | | ny Act of | e Act of 1934, f 1935 or Sectio 40 | n | | |
| (Print or Type] | Responses) | | | | | | | | | |
| 1. Name and Address of Reporting Person <u>*</u> Lamb Jeffrey D. | | | 2. Issuer Name and Ticker or Trading Symbol | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| | | | FLEET [FLT] | COR TEC | CHNOLOGI | ES INC | (Chec | k all applicab | le) | |
| (Last) (First) (Middle) 655 ENGINEERING | | | 3. Date of Earliest Transaction (Month/Day/Year) 04/13/2011 | | | | Director 10% Owner X Officer (give title Other (specify below) below) Exec VP Marketing & Sales | | | |
| DRIVE, SU | | | 0 1/ 10/2 | 2011 | | | Exec VP | Marketing & | Sales | |
| | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | 6. Individual or Joint/Group Filing(CheckApplicable Line)_X_ Form filed by One Reporting Person | | | | |
| NORCROS | S, GA 30092 | | | | | | Form filed by M Person | Iore than One F | Reporting | |
| (City) | (State) | (Zip) | Tab | ole I - Non-D | erivative Secu | rities Acq | uired, Disposed of | f, or Beneficia | ally Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | Execution I any | Date, if | Transaction Code | 4. Securities Acquired (A) of Disposed of (E (Instr. 3, 4 and (A) or Amount (D) | or S D) B 5) C F R T | ecurities F Beneficially (Dwned (| 6. Ownership Form: Direct D) or Indirect I) Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| Reminder: Rep | port on a separate line | e for each cla | uss of sec | urities benefi | cially owned d | irectly or i | indirectly. | | | |
| | | | | | information required t | on contain o respon | ond to the collec ned in this form d unless the form y valid OMB con | are not n | SEC 1474 (9-02) | |
| | Tab | | | | uired, Dispose options, conv | | eneficially Owned curities) | | | |
| 1. Title of Derivative | | ansaction Dat th/Day/Year) | | Deemed ation Date, if | 4. 5 Transaction | . Number Derivative | of 6. Date Exerc Expiration Da | | 7. Title and Amount of Underlying Securities | |

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| Security (Instr. 3) | or Exercise Price of Derivative Security | | any (Month/Day/Year) | Code (Instr. 8) | • • | Acquired (A) or Disposed of (D) (Instr. 3, 4, | | (Instr. 3 and 4) | |
|------------------------------|---|------------|-------------------------|--------------------|--------|--|--------------------|------------------|-------------------------------------|
| | | | | Code V | (A) (| D) Date Exercisable | Expiration Date | Title | Amount or Number of Shares |
| Employee Stock Options | \$ 33.49 | 04/13/2011 | | А | 65,000 | <u>(1)</u> | 04/13/2021 | Common Stock | 65,000 |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|---|---------------|-----------|----------------|-------------|--|--|--|
| | Director | 10% Owner | Officer | Other | | | |
| Lamb Jeffrey D. 655 ENGINEERING DRIVE SUITE 300 NORCROSS, GA 30092 | | | Exec VP Market | ing & Sales | | | |
| Signatures | | | | | | | |
| /s/Sean Bowen under power of attorney | | 04/15/2 | 011 | | | | |
| **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) Employee stock option vests ratably (25%) annually over four years, beginning on the first anniversary of the award date.

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.