## Edgar Filing: ST JOE CO - Form 4

ST JOE CO Form 4												
July 03, 200	7											
FORM	14									OMB AF	PROVAL	
Washington, D.C. 20549							OMB Number:	3235-0287				
Check this box if no longer subject to STATEMENT OF CHA				ANGES IN BENEFICIAL OWNERSHIP					NERSHIP OF	Expires: Estimated a	January 31, 2005 d average	
	Section 16. SECURITIES Form 4 or								burden hours per response 0.5			
Form 5 obligatio may com <i>See</i> Instr 1(b).	tinue. Section 17	7(a) of the		tility Ho	ldin	g Con	npany	Act of	e Act of 1934, 1935 or Section 0		0.0	
(Print or Type ]	Responses)											
LORD JOHN S Symbol			Symbol	Issuer Name <b>and</b> Ticker or Trading nbol JOE CO [JOE]				ıg	5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First)					(Checl	eck all applicable)					
	SIDE AVENUE		(Month/E 07/02/2	ay/Year)	i i uno				X Director Officer (give below)		Owner er (specify	
	Filed(Month/Day/Year) App				Applicable Line) _X_ Form filed by C	X_Form filed by One Reporting Person						
JACKSON	VILLE, FL 3220	)2							Form filed by M Person	lore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non	-Deri	ivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if any (Month/Day/Year)			on Date, if	Code (Instr. 3, 4 and 5) (Instr. 8)				d of (D)	Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
				Code	V A	mount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)			
Common Stock	07/02/2007			А	3	66	А	\$ 46.88	9,096	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

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

 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,	;	ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
1 8	Director	10% Owner	Officer	Other			
LORD JOHN S 245 RIVERSIDE AVENUE SUITE 500 JACKSONVILLE, FL 32202	Х						
Signatures							
/s/ Reece B. Alford, by power attorney	of	07/03	3/2007				
**Signature of Reporting Person		Da	ate				

## **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).

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.