Edgar Filing: ST JOE CO - Form 4

ST JOE CO											
Form 4											
March 07, 20	006										
FORM	14								OMB AF	PPROVAL	
	UNITED	STATES		RITIES A shington,			NGE C	COMMISSION	OMB Number:	3235-0287	
if no long subject to Section 1	Check this box if no longer subject to Section 16. Form 4 or				RITIES				Expires: January 31 2009 Estimated average burden hours per response 0.		
obligatio may cont See Instru 1(b).	tinue. Section 17(a) of the	Public U		ling Con	npany	Act of	e Act of 1934, 1935 or Section 0	1		
(Print or Type I	Responses)										
Corriggio Anthony Michael Symbol				uer Name and Ticker or Trading I DE CO [JOE]				5. Relationship of Reporting Person(s) to Issuer			
				Earliest Transaction				(Check all applicable)			
, <i>,</i> ,	SIDE AVENUE,	,	(Month/E 03/03/2	ay/Year)				Director X Officer (give below) Chief I		o Owner er (specify er	
			Amendment, Date Original Month/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 				
JACKSON	VILLE, FL 32202	2						Person	lore than One Ke	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-E	Derivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Executio any	ned n Date, if Day/Year)	3. Transactio Code (Instr. 8) Code V	4. Securi on(A) or Di (Instr. 3, Amount	spose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock	03/03/2006			А	1,610	А	\$ 59.01	12,210	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. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
r. o	Director	10% Owner	Officer	Other			
Corriggio Anthony Michael 245 RIVERSIDE AVENUE SUITE 500 JACKSONVILLE, FL 32202			Chief Financial Officer				
Signatures							
/s/ Anthony M. Corriggio	03/07/200)6					
**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).

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.