## Edgar Filing: ST JOE CO - Form 4/A

ST JOE CO												
Form 4/A												
October 10, 2	2007											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB AF	OMB APPROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287				
Check the									Expires:	January 31,		
if no longer subject to STATEMENT OF CHAN				GES IN BENEFICIAL OWNERSHI				NERSHIP OF	Estimated a	2005 average		
Section 1	6.	SECURITIES						burden hours per				
Form 4 o Form 5		Filed pursuant to Section 16(a) of the Securities Exchange Ac							response	0.5		
obligation		<b>^</b>					•					
may cont	inue. Section			•	•	· ·	•	1935 or Section	n			
See Instru	uction	50(II)	of the In	vestmen	t Compar	iy Ac	1 01 194	Ю				
1(b).												
(Print or Type I	Responses)											
1. Name and Address of Reporting Person <sup>*</sup> 2. Issuer Name and Ticker or Trading 5. Relationship of						5. Relationship of	Reporting Person(s) to					
MCCALMONT WILLIAM S Sy								Issuer				
			ST JOE	CO [JO	E]			(Chao)	k all applicable	.)		
(Last) (First) (Middle) 3. Date of				of Earliest Transaction				(Check	ck all applicable)			
			(Month/D	(Month/Day/Year)				Director		Owner		
245 RIVRERSIDE			10/05/2007					XOfficer (give below)	title Other below)	er (specify		
AVENUE, S	SUITE 500							· · · · · · · · · · · · · · · · · · ·	Financial Offic	er		
	(Street)		4. If Ame	endment. D	ate Origina	1		6. Individual or Jo	int/Group Filir	19(Check		
				nth/Day/Yea	-	-		Applicable Line)				
			10/09/2	-				_X_ Form filed by One Reporting Person Form filed by More than One Reporting				
JACKSON	VILLE, FL 32	202						Form filed by M Person	lore than One Re	porting		
(City)	(State)	(Zip)				~						
(City)	(Build)	(24)	Tabl	e I - Non-	Derivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of				3. 4. Securities Acquired Transaction(A) or Disposed of (D)				5. Amount of	6. Ownership			
Security (Instr. 3)	(Month/Day/Y	ear) Executio any	on Date, if	Code		-		Securities Beneficially	Form: Direct Indirect (D) or Benefic	Beneficial		
(11547-0)		(Month/Day/Yea							Indirect (I)	Ownership		
								Following	(Instr. 4)	(Instr. 4)		
						(A)		Reported Transaction(s)				
				<u> </u>		or		(Instr. 3 and 4)				
Common				Code V	Amount	(D)	Price \$					
Stock	10/05/2007			F	1,356	D	ъ 34.15	45,891	D			
STOCK							57.15					

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)

## Edgar Filing: ST JOE CO - Form 4/A

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. Transact Code (Instr. 8)	5. ionNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	Date	Unde Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	7 (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships							
	Director	10% Owner	Officer	Other				
MCCALMONT WILLIAM S 245 RIVRERSIDE AVENUE SUITE 500 JACKSONVILLE, FL 32202			Chief Financial Offi	cer				
Signatures								
/s/ Reece B. Alford, by power of attorney	of	10/10	10/10/2007					
**Signature of Reporting Person		Da	ite					
Explanation of Responses:								

## 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.