Edgar Filing: ST JOE CO - Form 4

ST JOE CO											
Form 4											
May 16, 2006	5										
FORM	4								-	PPROVAL	
	UNITEI	O STATES		ITIES A hington,			NGE	COMMISSION	OMB Number:	3235-0287	
Check this box if no longer				8 ,					Expires:	January 31,	
				GES IN 1	GES IN BENEFICIAL OWNERS					2005	
-	Section 16. SECURITIES							Estimated average burden hours per			
Form 4 or								response	•		
Form 5 obligation	· ·							ge Act of 1934,			
may conti	Nection 1	• •		•	U	1 v		of 1935 or Sectio	n		
See Instru	ction	30(h)	of the Inv	vestment	Compai	iy Ac	t of 19	40			
1(b).											
(Print or Type R	esponses)										
(I fint of Type R	(csponses)										
1. Name and A	ddress of Reportin	g Person *	2 Issuer	Name and	Ticker or	Tradir	ησ	5. Relationship of	f Reporting Per	rson(s) to	
AINSLIE MICHAEL L Symbol				r Name and Ticker or Trading				Issuer			
			•	CO [JOE	5						
			of Earliest Transaction				(Check all applicable)				
(Lust)	(1131)	(ivitable)	(Month/D		ansaction			X Director	109	% Owner	
245 RIVERS	SIDE AVENUI	E, SUITE	05/16/20	•				Officer (give	title Oth	er (specify	
500								below)	below)		
	(Street)		4 If Ame	ndment Da	te Origin:	1		6 Individual or I	oint/Group Fili	ng(Check	
				endment, Date Original onth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)			
								X Form filed by One Reporting Person			
JACKSONV	VILLE, FL 322	02						Form filed by M Person	More than One R	eporting	
(City)	(State)	(Zip)									
(City)	(State)	(Zip)	Table	e I - Non-D	erivative	Securi	ities Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of	2. Transaction D			3.	4. Secu			5. Amount of	6. Ownership	7. Nature of	
Security (Instr. 3)	(Month/Day/Yea	ar) Executi any	on Date, if	TransactionAcquired (A) or Code Disposed of (D)				Securities Beneficially	Form: Direct (D) or	Indirect Beneficial	
(Insu: 5)			/Day/Year)	CodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5)				Owned	Indirect (I)	Ownership	
							Following	(Instr. 4)	(Instr. 4)		
						(A)		Reported			
						or		Transaction(s) (Instr. 3 and 4)			
C				Code V	Amoun	t (D)	Price	(
Common Stock	05/16/2006			А	1,500	А	\$0	15,765	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	7. Titl Amou Under Securi (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date		Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Addro	ess	Relationships						
	Director	10% Owner	Officer	Other				
AINSLIE MICHAEL L 245 RIVERSIDE AVENUE SUITE 500 JACKSONVILLE, FL 3220	Х							
Signatures								
/s/ Michael L. Ainslie	05/16/2006							
<u>**</u> 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.