FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL								
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* Hilliard Stephen K. 2. Date of Event Requiring Statement (Month/Day/Year) 04/11/2011			nent	3. Issuer Name and Ticker or Trading Symbol ST JOE CO [JOE]							
(Last) 133 SOUTH	(First) WATERSOUNI	(Middle) D PARKWAY			4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director Officer (give title Other (specify)		er	5. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check			
(Street) WATERSOU (City)	JND FL (State)	32413 (Zip)			X	SVP-Operatio	below) '	,		cable Line) Form filed b	y One Reporting Person y More than One
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)					int of Securities ally Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Common Stock					16,579	D					
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
1. Title of Derivative Security (Instr. 4) 2. Date Exercisa Expiration Date (Month/Day/Yea		ate	and 3. Title and Amount of Securit Underlying Derivative Securit		ty (Instr. 4) Conver		rcise Form:		6. Nature of Indirect Beneficial Ownership (Instr. 5)		
			Date Exercisable	Expiration	n Title		Amount or Number of Shares	Price of Deriva	tive	Direct (D) or Indirect (I) (Instr. 5)	

Explanation of Responses:

Remarks:

<u>/s/ Stephen K. Hilliard</u> <u>04/19/2011</u>

** Signature of Reporting Person Dat

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

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.

 $^{^{\}star}$ If the form is filed by more than one reporting person, see Instruction 5 (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).