FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0287
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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*  TWOMEY KEVIN M						2. Issuer Name and Ticker or Trading Symbol ST JOE CO [ JOE ]								(Chec	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  V Officer (give title Other (specify				
(Last) (First) (Middle) 245 RIVERSIDE AVENUE SUITE 500						3. Date of Earliest Transaction (Month/Day/Year) 08/16/2004								X	belov	President, COO & CFO			
					4. 11	4. If Amendment, Date of Original Filed (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 Person													
(Street) JACKSONVILLE FL 32202																			
(City)	(St	ate)	(Zip)												1 010				
		Tab	le I - No	n-Deri\	ative/	Se	curitie	es Aco	quired,	Dis	posed of	, or	Benef	ficially	Owne	ed			
1. Title of Security (Instr. 3)				2. Transaction Date (Month/Day/Year		ar)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)						Secur Benef Owne	5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A (C	A) or F	Price	Transa	action(s) 3 and 4)		(Instr. 4)	
Common				08/16	6/2004	1			S		500		D S	\$42.89	3	85,066	D		
Common				08/16	6/2004	1			S		300		D	\$42.9	3	84,766	D		
Common				08/16	6/2004	1			S		300		D S	\$42.92	3	84,466	D		
Common				08/16	6/2004	1			S		100		D S	\$42.93	3	84,366	D		
Common				08/16	6/2004	!			S		900		D S	\$42.99	3	83,466	D		
Common				08/16	6/2004	1			S		5,100		D	\$43	3	78,366	D		
Common				08/16	6/2004	1			S		2,500		D S	\$43.01	3	75,866	D		
Common				08/16	6/2004	ļ ļ			S		1,600		D S	\$43.02	3	74,266	D		
Common				08/16	6/2004	<u> </u>			S		1,500		D S	\$43.03	3	72,766	D		
Common				08/16	6/2004	1			S		4,700		D S	\$43.04	3	68,066	D		
Common				08/16	5/2004	1			S		1,400		D S	\$43.05	3	66,666	D		
Common				08/16/2004					S		1,900		D S	\$43.06	3	64,766	D		
Common				08/16/2004		1			S		4,200 D		D S	\$43.07	3	60,566	D		
Common				08/16/2004					S		1,500		D S	\$43.08	3	59,066	D		
Common				08/16/2004					S		1,200		D S	\$43.09	3	57,866	D		
Common				08/16/2004		ļ			S		1,200		D	\$43.1	356,666		D		
Common				08/16/2004		ļ			S		2,200		D :	\$43.11	354,466		D		
Common				08/16/2004		1			S		3,200		D S	\$43.12	351,266		D		
Common 08/16					6/2004				S		300		D S	\$43.13	3	50,966	D		
Common 08/16/3					6/2004	/2004					400		D S	\$43.15	350,566		D		
		T	able II - I )								sed of, o				wned				
1. Title of Derivative Security (Instr. 3)	rivative Conversion Date Executio curity or Exercise (Month/Day/Year) if any			n Date, Transac Code (Ir			on of E		6. Date E Expiratio (Month/D	n Date	•	Amou Secur Under Deriv	·		Price of ivative curity str. 5)	9. Number o derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amou or Numb of Share	er					

Explanation of Responses:

Remarks:

These sales were effected pursuant to a previously adopted 10b5-1 plan.

/s/ Kevin Twomey

\*\* Signature of Reporting Person

<u>womey</u> <u>08/17/2004</u>

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

- \* 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.

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.