### FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response... 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Ty	pe Response	s)												
1. Name and Address of Reporting Person* KNOX RUTH A				2. Issuer Name and Ticker or Trading Symbol CAPITAL CITY BANK GROUP INC [CCBG]					_X_ Direc	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  _X_ Director Officer (give title below) Other (specify below)				
(Last) (First) (Middle) PRESIDENT OF WESLEYAN COLLEGE, 4760 FORSYTH ROAD			3. Date of Earliest Transaction (Month/Day/Year) 05/02/2005											
(Street) MACON, GA 31210			4. If Amendment, Date Original Filed(Month/Day/Year)					_X_ Form fil	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person					
(City) (State) (Zip)			Table I - Non-Derivative Securities Acqu					uired, Disp	ired, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, i any (Month/Day/Year	(Instr.	8)	(A) or	Dispose 3, 4 and (A) or (D)	d of (D	Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock		05/02/2005		P		411		\$ 35.2	1 820		D			
Reminder: 1	Report on a s	separate line f		Derivative Securi	ties Acq	Po co th uired,	ersons wontained ne form d	ho respin this isplays	form a a curr Benefici		uired to res OMB cont	spond unle	ss	1474 (9-02)
		<u> </u>		(e.g., puts, calls, w									_	
Security	2. Conversion or Exercise Price of Derivative Security		Execution Day (Year) any	te, if Transaction Code (Instr. 8) Terivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		r a (I	6. Date Exercisable and Expiration Date (Month/Day/Year)		Aı Uı Se		unt of crlying rities r. 3 and Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Owners Form of Derivati Security Direct ( or Indire	Beneficia Ownersh (Instr. 4)
				Code V	(A) (		Date Exercisable	Expira Date	tion Ti	Amount or Number of Shares				

## **Reporting Owners**

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
KNOX RUTH A PRESIDENT OF WESLEYAN COLLEGE 4760 FORSYTH ROAD MACON, GA 31210	X						

## Signatures

Ruth A. Knox	05/02/2005
**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).
- (1) These shares were purchaed in 2005 under the Company's 2005 Director Stock Purchase Plan and were exempt from the short-swing liability provisions of Section 16 pursuant to Rule 16b-(3) promuglated thereunder.

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.